

ASS. REC. BY:

REF: CS/SMO17015493/Arb02

Special Instruction:

Surveyor

## ASSIGNMENT (Office)

From (Person):

Irene

of

Sompoo

Date/Time:

11/8/17

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKJ 116S

Insured:

SLP 4972S

at Workshop no/s

T K MOTOR

Tel:

of

Kaki Bukit

Policy No:

Claim No:

CMTD1702760/GSG

Sum Insured:

Excess:

Make of Veh:

D.O.A.

07/8/17

(Client's Record)

will direct call Adrian

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle-IN/OUT

Date/Time

Action/Instruction ( ) Estimate

SKJ 116S x

SLP 4972S x

Sent pending est to Irene

ASS. REC. BY: Adrian Ling

REF:

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SKJ1165 Yr Regn: 12012Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: Bmw C.C. 1997Colour: Blue A/C: Insured / Std / NI / NASp. Reading: 71493 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: WBA76120 \* 50DX 49329Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim\* orTyre Size: F: 245/40R19R: 245/40R19BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or \_\_\_\_\_

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. \_\_\_\_\_ D.O.I. 11/08/17Survey held at T.K.Des. of Damages : Frnt / Rear / O/S / N/S / U/C / Rooftop orFront u/s, u/c.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP Sampo</u>
	<u>confirm L/S \$12K, 7 days</u>
	<u>Ed: \$9674.40, 45%.</u>

Date/Time, File Pass to?

☐

: Preli. Report

1) August☒

: Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 7

Resurvey No. of Trip: \_\_\_\_\_

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Other

TOTAL

Report Format : TPLump Sum / I.B.T. (\$) 12K450



# 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				
SOMPO INSURANCE SINGAPORE PL			Ref : CS/SMO17015493/Arb	
50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWERSINGAPORE 048623			Date : 11-08-2017	
			Code : SMO	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLP 4972S	Veh. Inspected	SKJ 116S	
Policy No.		Coverage (\$)	0.00	
Claim No.	CMTD1702760/GSG	Excess (\$)	0.00	
Assign From	IRENE	Assign Date	11/08/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	07/08/2017	Inspection Date	11/08/2017	
Survey held at	T K MOTOR WORKSHOP BLK 1 KAKI BUKIT AVE 6 #02-56 SINGAPORE 417883			
<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.				

## Ashley Chong (LKK Auto)

---

**From:** Henry, Irene James <irene.henry@sompo.com.sg>  
**Sent:** Friday, 11 August, 2017 11:41 AM  
**To:** 'assignments'  
**Subject:** FW: ACCIDENT INVOLVING SLP 4972S & SKJ 116S ON 7 AUGUST 2017  
**Attachments:** 3931\_001.pdf

**From:** Henry, Irene James  
**Sent:** Friday, 11 August, 2017 11:40 AM  
**To:** 'Ashley Chong (LKK Auto)' <admin-d@lkkauto.com>  
**Cc:** 'Ashley Chong (LKK Auto)' <admin-d@lkkauto.com>  
**Subject:** ACCIDENT INVOLVING SLP 4972S & SKJ 116S ON 7 AUGUST 2017

*14*  
*call admin*

Our Reference: CMTD1702760/GSG

Hi,

Kindly assign your motor surveyor, Marcus Chua, to conduct motor survey of the mentioned (SKJ 116S).

Please refer to the attachment.

Best Regards

**Irene Henry**

Claims Division

D: 6322 4618 | T: 6461 6555 | F: 6221 3147



Innovation for Wellbeing

**SOMPO**

**A Century of Trust**

**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

**Website:** [www.sompo.com.sg](http://www.sompo.com.sg) | **Facebook:** [www.facebook.com/SompoSG](https://www.facebook.com/SompoSG)

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**KURU & CO**

Advocates & Solicitors  
UEN / GST Registration No: 53130937A

150 South Bridge Road  
#04-06 Fook Hai Building  
Singapore 058727

Kurubalan s/o Manickam Rengaraju  
Jan Chua Peck Kiang

Tel: 65322 009 (5 lines)  
Fax: 65322 007 (Our fax no. is not for service of court documents)

Sampo Insurance Singapore Pte. Ltd.	
Client	
11 AUG 2017	

Our ref: **L.17.1274.AT**  
(Please quote our reference when replying)

10 August 2017

Sompo Insurance Singapore Pte Ltd  
50 Raffles Place  
#05-01/06 Singapore Land Tower  
Singapore 048623

BY FAX ONLY : 6221 3147  
Your ref : SLP 4972S  
CMTD1702760 / 656

Dear Sirs,

**ACCIDENT INVOLVING SKJ 116S & SLP 4972S ON 07.08.2017  
ALONG UBI ROAD 1 TOWARDS KPE  
PRE-REPAIR SURVEY - APPOINTMENT OF SURVEYOR**

Our client is agreeable to the following surveyor(s): **LKK Auto Consultants/Marcus Chua**

Please arrange for your surveyor to survey our client's vehicle at the following address:

**TK Motor Workshop  
AutoBay@Kaki Bukit  
Blk 1 Kaki Bukit Ave 6  
#02-56  
Singapore 417883  
Tel: 96273323**

Please instruct your surveyor to conduct the pre-repair survey immediately and complete the pre-repair survey within 2 working days of his appointment.

Kindly let us have the pre-repair and/or post repair survey report upon completion of the survey(s).

As solicitors on record, our client shall look to you for payment of our legal costs plus disbursements should you reach a direct settlement with our client's repairer.

Yours faithfully,

*Kuru & Co*

Encl

Cc. client

## Janice Lee (LKKAUTO)

---

**From:** Janice Lee (LKKAUTO)  
**Sent:** Wednesday, August 16, 2017 9:53 AM  
**To:** 'Henry, Irene James'  
**Cc:** Admin-D (LKKAUTO)  
**Subject:** RE: ACCIDENT INVOLVING SLP 4972S & SKJ 116S ON 7 AUGUST 2017

Dear Irene,

Please be informed that we have inspected the vehicle **SKJ 116S** on **11-08-2017**.  
We are pending estimate from repairer.

Thank you.

Best Regards,

**Janice Lee (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [janicelee@lkkauto.com](mailto:janicelee@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Henry, Irene James [mailto:[irene.henry@sompo.com.sg](mailto:irene.henry@sompo.com.sg)]  
**Sent:** Friday, August 11, 2017 11:40 AM  
**To:** Admin-D (LKKAUTO) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>  
**Cc:** Admin-D (LKKAUTO) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>  
**Subject:** ACCIDENT INVOLVING SLP 4972S & SKJ 116S ON 7 AUGUST 2017

Our Reference: CMTD1702760/GSG

Hi,

Kindly assign your motor surveyor, Marcus Chua, to conduct motor survey of the mentioned (SKJ 116S).

Please refer to the attachment.

Best Regards

**Irene Henry**

Claims Division

D: 6322 4618 | T: 6461 6555 | F: 6221 3147



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50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

Website: [www.sompo.com.sg](http://www.sompo.com.sg) | Facebook: [www.facebook.com/SompoSG](https://www.facebook.com/SompoSG)

MSME17105154 / SME Motor Pte Ltd - Kaki Bukit  
ENTRY DATE & TIME: 08/08/2017 17:23

## 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 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 ability.
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 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 Report 08/08/2017 17:23  
Date Of Accident 07/08/2017 17:45  
Exact Location Of Accident UBI RD 2 TWDS AIRPORT RD (KPE).  
Country/State of Loss SINGAPORE

## DETAILS OF OWN VEHICLE

Vehicle Registration Number SKJ116S  
**Insured/Policyholder**  
Name Of Registered Owner NGUAN CHOON KEOW JULIANA  
NRIC No S6916138C  
Email Address NOEMAIL  
Mobile Phone No (LOCAL) +65-96347734  
Alternative Phone No OFFICE-96347734

## Vehicle Particulars

Manufacturer BMW  
Model 520I

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY  
Vehicle Category PRIVATE CAR

## Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD  
Type Of Coverage COMPREHENSIVE  
Fleet Policy NO  
Policy Number GA061302  
Cover Note Number

## Driver

Name of Driver TAN MEOW TEEN MARY  
NRIC No S0108225F  
Date Of Birth 06/05/1954  
Occupation INDOOR  
Date Of Driving Pass 24/03/1979  
Driving Experience 38 YEARS AND 4 MONTHS  
Gender FEMALE  
Mobile Number (LOCAL) +65-96347734  
Fax Number  
Contact Number  
Email Address NOEMAIL

Address BLK 1A CONTONMENT RD #41-03  
 Postcode 085101  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured FRIEND  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

### 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 this accident? NO  
 Was any body injured in the Accident? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 1

### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

### Circumstances of Accident

ON 07/08/2017 AT ABOUT 1745HRS, I WAS TRAVELLING ALONG UBI ROAD 2 AS THE TRAFFIC WAS IN MY FAVOUR, IN FRONT OF ME VEHICLE STOP SO I FOLLOWED SUIT. VEHICLE B WAS PARKED AT THE ROAD SIDE OF MY LEFT HAND SIDE, SUDDENLY VEHICLE B TURNED TO HIS RIGHT WITHOUT SIGNAL AND HIT ONTO MY VEHICLE A LEFT FRONT SIDE PORTION AND ALSO DAMAGED TO MY LEFT HAND FRONT SPORTS RIM. THE DRIVER OF VEHICLE A ADMITTED IT WAS HIS FAULT. I HAD A VOICE RECORDING PROOF.

### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLP4972S  
 Vehicle Make/Model/Colour  
 Details Of Properties VEHICLE B  
 Name of Driver PNG SOON PENG  
 NRIC/Passport Number  
 Contact Number 96622518  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver) 2

### Details of Witness

Name  
 Phone Number  
 Email Address



## Accident Sketch Plan Pg. 1

## SKETCH PLAN

## IMPORTANT NOTICE

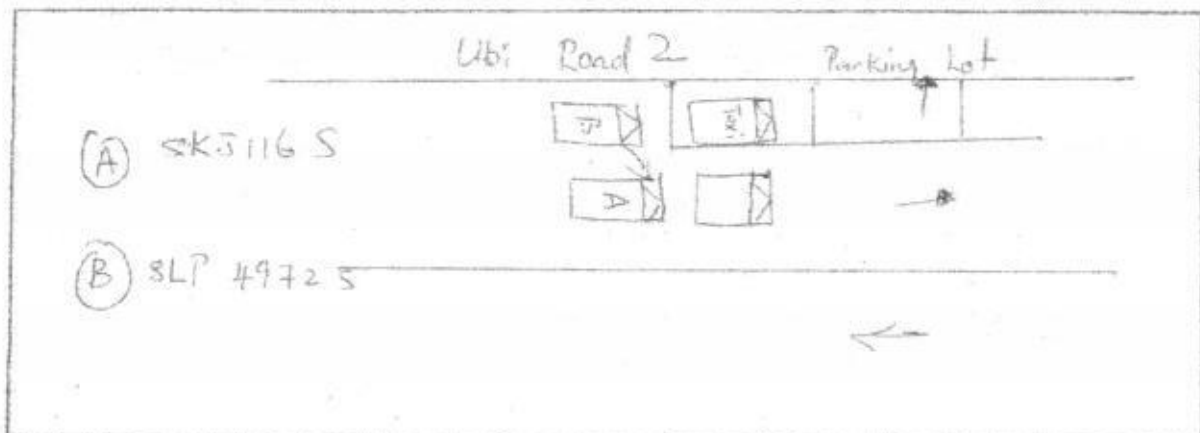
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may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

*Julian*  
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



## Accident Sketch Plan Pg. 1

## Describe Circumstances of the Accident

On 1/8/2017 at about 17:45 hrs. I was travelling along A66 road 2 as the traffic was in my favour. In front of me vehicle stop so I followed suit. Vehicle B was parked at the road side of my left hand side. Suddenly vehicle B turned to his right without any signal and hit into my vehicle A left front side portion and also damaged to my left hand front sports rim. The driver of vehicle B admitted it was his fault. I had a voice recording proof.

## Declaration

We declare the foregoing particulars are true in every respect.

*Julian*

Policyholder's Signature / Date & Time

*[Signature]*

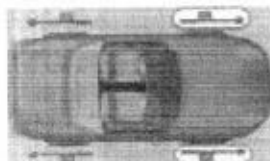
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Insurance Co.	AXA Insurance
Vehicle NO.	SKJ 1165
Date Of Accident	7, 8, 2017
<input type="checkbox"/> Reporting Only	
<input type="checkbox"/> Own Damage Claim	
<input checked="" type="checkbox"/> Third Party Claim	TK



PEOPLES AUTO TRADING  
BLK 3007 UBI ROAD 1 #01-400  
TEL 6741 4646



COMPUTERIZED ALIGNMENT SPECIALISTS

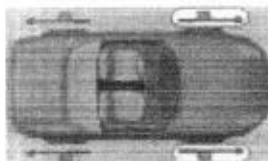
CUSTOMER	CASH	DATE	Aug 12, 2017 2:14:16 PM
LICENSE NO.	SKJ 116 S		
MILEAGE	71495		
REFERENCE	CUSTOM	MODEL	BMW 5 SERIES (F10)

Front Wheel	SPECS				DIAGNOSIS				ADJUSTMEN			
	min	prv	max	Δ	L	total	R	Δ	L	total	R	Δ
TOTAL TOE	-1.80	1.80	5.60			12.70				12.50		
PARTIAL TOE	-0.90	0.90	2.80		4.80		7.80		11.20		1.20	
SET BACK	---	---	---			0°12"				0°12"		
CAMBER	-0°42"	-0°12"	0°16"		-0°10"		-0°06"	0°04"	-0°18"		0°02"	0°20"
CASTER	5°42"	6°42"	7°42"		6°30"		6°38"	0°08"	6°30"		6°38"	0°08"
KING-PIN	---	---	---		8°20"		8°58"	0°36"	8°20"		8°58"	0°36"
INCL. ANGLE	---	---	---		8°08"		8°52"		8°02"		9°00"	
Toe-out on turns	---	---	---		---		---		---		---	
STEERING IN	---	---	---		---		---		---		---	
STEERING OUT	---	---	---		---		---		---		---	

Rear Wheel	SPECS				DIAGNOSIS				ADJUSTMEN			
	min	prv	max	Δ	L	total	R	Δ	L	total	R	Δ
TOTAL TOE	-0.30	1.60	3.70			2.30				2.30		
PARTIAL TOE	-0.10	0.80	1.80		2.90		-0.50		2.90		-0.50	
SET BACK	---	---	---			0°04"				0°04"		
CAMBER	-2°00"	-1°30"	-1°00"		-1°56"		-1°40"	0°16"	-1°56"		-1°40"	0°16"
THRUST ANGLE	-0°08"	0.00	0°08"			0°16"				0°16"		



PEOPLES AUTO TRADING  
BLK 3007 UBI ROAD 1 #01-400  
TEL 6741 4646



COMPUTERIZED ALIGNMENT SPECIALISTS

CUSTOMER	CASH	DATE	Aug 22, 2017 1:24:10 PM
LICENSE NO.	SKJ 116 S		
MILEAGE	71501		
REFERENCE	CUSTOM	MODEL	BMW 5 SERIES (F10)

Front Wheel                      SPECS                      DIAGNOSIS                      ADJUSTMEN

	min	prv	max	Δ	L	total	R	Δ	L	total	R	Δ
TOTAL TOE	-1.80	1.80	5.60			8.80				-0.10		
PARTIAL TOE	-0.90	0.90	2.80		2.30		6.40		0.00		0.00	
SET BACK	---	---	---			-0°06"				-0°06"		
CAMBER	-0°42"	-0°12"	0°16"		0°06"		-0°04"	0°10"	0°14"		0°00"	0°16"
CASTER	5°42"	6°42"	7°42"		6°30"		6°52"	0°22"	6°30"		6°52"	0°22"
KING-PIN	---	---	---		8°24"		8°56"	0°32"	8°24"		8°56"	0°32"
INCLANGLE	---	---	---		8°30"		8°52"		8°40"		8°54"	
Toe-out on turns	---	---	---		---		---		---		---	
STEERING IN	---	---	---		---		---		---		---	
STEERING OUT	---	---	---		---		---		---		---	

Rear Wheel                      SPECS                      DIAGNOSIS                      ADJUSTMEI

	min	prv	max	Δ	L	total	R	Δ	L	total	R	Δ
TOTAL TOE	-0.30	1.60	3.70			2.30				1.90		
PARTIAL TOE	-0.10	0.80	1.80		2.70		-0.30		0.90		0.90	
SET BACK	---	---	---			0°04"				0°04"		
CAMBER	-2°00"	-1°30"	-1°00"		-1°56"		-1°40"	0°14"	-1°10"		-1°08"	0°00"
THRUST ANGLE	-0°08"	0.00	0°08"			0°14"				0°00"		

# T K MOTOR WORKSHOP

1 KAKI BUKIT AVE 6 #02-56  
SINGAPORE 417883  
TEL: 96273323 FAX: 68442641  
CO. REG NO : 53049097L

Adrian

Third party: Sompoo Ja  
L/S 12 day.

NGUAN CHOON KEOW JULIANA  
BLK 1 A CONTONMENT RD #41-03  
SINGAPORE 085101

TP Sompoo  
Janice.

DATE: 27/08/2017

By Hand: 15/9/2017  
WBAXG120502X49328

ACCIDENT DATE: 07/08/2017

ESTIMATE COST OF REPAIRS BILL TO BMW 520I CAR NO: SKJ116S

1	PC FRONT HEADLAMP L/H	cracked	SS	2,236.00	2,236.00 ✓
1	PC FRONT BUMPER	Delam		1,328.00	1,328.00 ✓
8	PC FRONT BUMPER CLIP	m		36.00	36.00 ✓
1	PC FRONT BUMPER SIDE RETAINER	m		126.00	126.00 ✓
1	PC FRONT BUMPER SPONGE	cracked		155.00	155.00 ✓
2	PC FRONT BUMPER SIDE CLIP	m		12.00	12.00 ✓
1	PC FRONT BUMPER PARKING SENSOR	Dgd		351.00	351.00 ✓ 280
1	PC FRONT FENDER L/H	Rpis		769.00	769.00 ✓
1	PC FRONT FENDER L/H INNER BRACKET	2x m		65.00	65.00 ✓
1	PC FRONT FENDER L/H INNER GARNISH	torn		117.00	117.00 ✓
2	PC FRONT R/H FENDER INNER SHIELD	torn		362.00	362.00 ✓
1	PC FRONT FOG LAMP L/H	HE m		260.00	260.00 ✓
1	PC FRONT BUMPER R/H LOWER COVER	torn		88.00	88.00 ✓
1	PC FRONT L/H SPORT RIM	lt		1,560.00	1,560.00 ✓ 125.8 (m)
1	PC FRONT L/H TYRE	nt		900.00	900.00 ✓ 400 (m)
1	PC FRONT L/H LOWER ARM	But		397.00	397.00 ✓
1	PC FRONT L/H KNUCKLE ARM	But		824.00	824.00 ✓
1	PC FRONT L/H KNUCKLE HUP	Dgd		427.00	427.00 ✓
1	PC FRONT L/H KNUCKLE BEARING	m		265.00	265.00 ✓
1	PC FRONT L/H HEADLAMP PANEL	cracked		328.00	328.00 ✓
1	PC FRONT L/H SHOCK ASBORBER	But		697.00	697.00 ✓
1	PC FRONT L/H TRAILING ARM	But		446.00	446.00 ✓
1	PC L/H SIDE SKIRT	torn		756.00	756.00 ✓
13	PC L/H SIDE SKIRT CLIP	m		62.40	62.40 ✓ 30
1	PC L/H SIDE SKIRT BRACKET	m		36.00	36.00 ✓
1	PC FRONT STEERING RACK & PINO	Dgd		4,646.00	4,646.00 ✓ 3802
1	PC FRONT L/H LINKAGE	But		89.00	89.00 ✓
1	PC FRONT L/H UPPER ARM	But		398.00	398.00 ✓
1	PC FRONT STABILIZER BAR	nt m		483.00	483.00 ✓
1	PC FROBT ABS BRAKE SENSOR	nt m		285.00	285.00 ✓

13082  
12427.80

S.W. 1650

# T K MOTOR WORKSHOP

1 KAKI BUKIT AVE 6 #02-56  
SINGAPORE 417883  
TEL:96273323 FAX: 68442641  
CO. REG NO :53049097L

TO CHECK WRING .	50.00	<del>50.00</del> 30
TO SPRAY PAINTING.	900.00	<del>900.00</del> 400
TO REMOVE & REFIX FRONT UNDER CARRIAGE, STEERING RACK AND PINO	750.00	750.00 ✓
TO CONDUCT 4 WHEEL COMPUTER WHEEL ALIGHTMENT.	180.00	<del>180.00</del> 80
TO RESET FAULT CODE & CARRY OUT DIAGNOSTIC CHECK.	280.00	<del>280.00</del> x
TO MEASURE, DRILL THE REPLACED BUMPER, POSITION & RESTALL PARKING SENSOR, CONTROL UNIT, CHECK & TEST FOR FUNCTIONING.	960 80.00	<del>80.00</del> 50
TO APPLY UNDERCOATING ON THE REPAIRED & REPLACED PANEL FOR RUST PROTECTION.	80.00	80.00 x
TO LABOUR CHARGE FOR PANEL BEATING, WELDING, REMOVING ALL DAMAGED PARTS & REPLACING OF THE NEW PARTS ETC.	850.00	<del>850.00</del> 400

TOTAL S\$

21,674.40

total: 150379

h/s: 12K

07 Rys.

07 Rys.

12K

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer

Signature:

Date:



## 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				
SOMPO INSURANCE SINGAPORE PL			Ref : CS/SMO17015493/Arbn2	
50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWERSINGAPORE 048623			Date : 27-11-2017	
			Code : SMO	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SLP 4972S	Veh. Inspected	SKJ 116S	
Policy No.		Coverage (\$)	0.00	
Claim No.	CMTD1702760/GSG	Excess (\$)	0.00	
Assign From	IRENE	Assign Date	11/08/2017	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	BMW	c.c	1997	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	WBAXG12050DX49329	Colour	BLUE	
Odometer	71493	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	245/40 R19	MICHELIN	6 mm	
L/H Front Tyre	245/40 R19	MICHELIN	6 mm	
R/H Rear Tyre	245/40 R19	MICHELIN	6 mm	
L/H Rear Tyre	245/40 R19	MICHELIN	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION AND UNDERCARRIAGE. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	07/08/2017	Inspection Date	11/08/2017	
Survey held at	T K MOTOR WORKSHOP BLK 1 KAKI BUKIT AVE 6 #02-56 SINGAPORE 417883			
<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:		7 Working Days		





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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKJ 116S

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	FRONT HEADLAMP L/H	CRACKED	2,236.00	2,236.00
1	FRONT BUMPER	DEFORMED	1,328.00	1,328.00
8	FRONT BUMPER CLIP	NECESSARY	36.00	36.00
1	FRONT BUMPER SIDE RETAINER	NECESSARY	126.00	126.00
1	FRONT BUMPER SPONGE	CRACKED	155.00	155.00
2	FRONT BUMPER SIDE CLIP	NECESSARY	12.00	12.00
1	FRONT BUMPER PARKING SENSOR	DAMAGED	351.00	280.00
1	FRONT FENDER L/H	TO REPAIR SEE LABOUR	769.00	-
1	FRONT FENDER L/H INNER BRACKET	NOT NECESSARY	65.00	-
1	FRONT FENDER L/H INNER GARNISH	NOT NECESSARY	117.00	-
2	FRONT R/H FENDER INNER SHIELD	TORN	362.00	362.00
1	FRONT FOG LAMP L/H	NOT NECESSARY	260.00	-
1	FRONT BUMPER R/H LOWER COVER	TORN	88.00	88.00
1	FRONT L/H LOWER ARM	BENT	397.00	397.00
1	FRONT L/H KNUCKLE ARM	BENT	824.00	824.00
1	FRONT L/H KNUCKLE HUP	DAMAGED	427.00	427.00
1	FRONT L/H KNUCKLE BEARING	NECESSARY	265.00	265.00
1	FRONT L/H HEADLAMP PANEL	CRACKED	328.00	328.00
1	FRONT L/H SHOCK ABSORBER	BENT	697.00	697.00
1	FRONT L/H TRAILING ARM	BENT	446.00	446.00
1	L/H SIDE SKIRT	TORN	756.00	756.00
13	L/H SIDE SKIRT CLIP	NECESSARY	62.40	30.00
1	L/H SIDE SKIRT BRACKET	NOT NECESSARY	36.00	-
1	FRONT STEERING RACK & PINO	DAMAGED	4,646.00	3,802.00
1	FRONT L/H LINKAGE	BENT	89.00	89.00
1	FRONT L/H UPPER ARM	BENT	398.00	398.00
1	FRONT STABILIZER BAR	NOT NECESSARY	483.00	-
1	FRONT ABS BRAKE SENSOR	NOT NECESSARY	285.00	-
	LESS 5% DISCOUNT		-	-654.10
			16,044.40	12,427.90
<b><u>SPECIAL NETT ITEMS</u></b>				
1	FRONT L/H SPORT RIM (SN)	CUT	1,560.00	1,250.00

Report Ref No. CS/SMO17015493/Arbn2





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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	FRONT L/H TYRE (SN)	CUT	900.00	400.00
	<b>LABOUR</b>		2,460.00	1,650.00
	TO CHECK WIRING.		50.00	30.00
	TO SPRAY PAINTING.		900.00	400.00
	TO REMOVE & REFIX FRONT UNDER CARRIAGE, STEERING RACK AND PINO.		750.00	750.00
	TO CONDUCT 4 WHEEL COMPUTER WHEEL ALIGHTMENT.		180.00	80.00
	TO RESET FAULT CODE & CARRY OUT DIAGNOSTIC CHECK.	NOT NECESSARY	280.00	-
	TO MEASURE, DRILL THE REPLACED BUMPER, POSITION & RESTALL PARKING SENSOR, CONTROL UNIT, CHECK & TEST FOR FUNCTIONING.		80.00	50.00
	TO APPLY UNDERCOATING ON THE REPAIRED & REPLACED PANEL FOR RUST PROTECTION.	NOT NECESSARY	80.00	-
	TO LABOUR CHARGE FOR PANEL BEATING, WELDING, REMOVING ALL DAMAGED PARTS & REPLACING OF THE NEW PARTS ETC. INCLUSIVE OF THE REPAIR OF FRONT FENDER L/H.		850.00	400.00
			3,170.00	1,710.00
<b>GRAND TOTAL</b>			<b>21,674.40</b>	<b>15,787.90</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>12,000.00</b>

Report Ref No. CS/SMO17015493/Arbn2

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

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