

APP. REQ. BY: Sebastian REF: CS/GAI17020544 / Brbn2
 SUBJECT: ASSIGNMENT (Office)
 From (Person): Sharon Ng GAI DATE/TIME: 26/10/17 @ 4:53pm
 Estimated Cost: Bill w
 OD: ☒ TS / IP RES / OD RES / EVA / INV / MW / CS
 To Inspect Vehicle No: SLG 5854R Insured: SLP 5372 S
 at Workshop in: World Auto Tel: 97588347
 of: No. 1 Kranji Loop, 739535
 Policy No: CLMOMVC 000001474 (6mb) CLAIM NO:
 Sum Insured: Excess:
 Make of Veh: D.O.A. 22/10/2017
 (Client's Record) 27/10/2017
 CA / REV / REP. / REV 24 HRS 'wp' H.O.D. Endorsement:
 Date/Time: 26/10/17 @ 4:55pm Person Contacted: Mr. Sim Vehicle: ☒ IN ☐ OUT

Date/Time	Action/Instruction (✓) Estimate
	SLG 5854R - X
	SLP 5372 S - X
	Sent preli thru email

REF: GAI

ASSIGNMENT

From: Date: 27/10/2017

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: SLG 5854R

at Workshop n/s: World Auto

of No. 1 Kranji Loop, 739 535

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 Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res: Yes or No

Lump Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS 'up'

Vehicle IN / OUT

Date: Person Contacted:

Veh No: SLG 5854R

Veh Regn: 5/10/2016

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

Truck / Trailer or

Make: Toyota / Prins

G.O. 1779

Colour: Silver

A.C. Insured / Std / NI / NA

Sp. Reading: 92677

T. Radio: Insured / Std / NI / NA

Eng No:

C.No: J TPK B 3FL 005535374

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim or

Tyre Size: F: 175/65R15

R: "

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

TOYO / YOKO or

Yoko

Front

Rear

R/Bal: 6 mm

R/Bal: 6 mm

L/Bal: 6 mm

L/Bal: 6 mm

D.O.A. 22/10/2017

D.O.A. 27/10/2017

Survey held at: World Auto

Des. of Damages: Fr / Rear / OS / N/S / U/C / Rooftop or

fit o/s

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

Date / Time Action / Instruction

Confirm \$1762.52, 4 days
 Red: \$2772.93, 61%.

RECEIVED 05 FEB 2018

Date/Time File Pass to:

typist



Date/Time File Return to:

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Fuel (4-5000):

Phone:

Other:

Total:

Total:

Add Fee:



Site Insp: \$



Interview: \$



Tech. Insp: \$



Neighbour: \$

Report Format:

TP

Lump Sum / I.B. \$ 1762.52

250



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				
GREAT AMERICAN INSURANCE COMPANY		Ref : CS/GAI17020544/Srb		
3 TEMASEK AVENUE #16-01 CENTENNIAL TOWER SINGAPORE 039190		Date : 26-10-2017		
		Code : GAI		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLP 5372S	Veh. Inspected	SLG 5854R	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From	SHARON NG	Assign Date	26/10/2017	
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	22/10/2017	Inspection Date		
Survey held at	WORLD AUTO PTE LTD 47 JALAN PEMIMPIN #01-02/03 HALCYON 2 BLDG SINGAPORE 577200			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: TBA

Our Ref: CS/GAI17020544/Srb

The Motor Claims Department
GREAT AMERICAN INSURANCE COMPANY

Dear Sir/Madam,

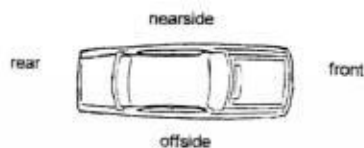
INITIAL INSPECTION REPORT OF VEHICLE NO. SLG 5854R .

Please be informed that we had conducted the inspection of the above mentioned vehicle on 27/10/2017 at the premises of M/s WORLD AUTO and have the following to report:-

Workshop Estimate Amount	: S\$ <u>4,535.45</u> .
Revised Estimate Amount	: S\$ <u>1,762.53</u> .
"Check" Items Amount	: S\$ <u>-</u> .
Market Value	: S\$ <u>-</u> .
LTA Reimbursement Value	: S\$ <u>-</u> .
Nett Value	: S\$ <u>-</u> .

Description of Damage:

The vehicle sustained damages
at the front o/s portion.



Yours faithfully

SEBASTIAN
Automotive Assessor

Nivitha (LKK Auto)

From: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Sent: Thursday, 26 October, 2017 4:53 PM
To: SUR; assignments
Subject: RE: 3rd party survey for SLG5854R against GA-SLP5372S - DOA: 22/10/2017
Attachments: Insd - SLP5372S.pdf; TP - SLG5854R.PDF

Dear Sir

Please arrange to conduct TP survey.

Regards
Sharon Ng
Great American

From: sim@worldauto.com.sg [mailto:sim@worldauto.com.sg]
Sent: Thursday, October 26, 2017 3:50 PM
To: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Subject: Re: 3rd party survey for SLG 5854R

Dear sir
Please arrange a 3rd party surveyor to survey the following car
Our client: SLG 5854R
Your Insured: SLP 5372S
Date of accident: 22/10/17
Regards
S.T.Sim
World Auto Pte Ltd
No 1 Kranji Loop
Singapore 739535
Mobile: 97588347

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Janice Lee (LKKAUTO)

From: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Sent: Friday, February 02, 2018 7:01 PM
To: Janice Lee (LKKAUTO)
Subject: FW: 3rd party survey for SLG5854R against GA-SLP5372S - DOA: 22/10/2017 || Our ref: CLMOMVC00001474 (Grab)
Attachments: SLG 5854R .pdf

Dear Janice – Our ref: CLMOMVC000001474 (Grab)

From: Janice Lee (LKKAUTO) [mailto:JaniceLee@lkkauto.com]
Sent: Friday, February 02, 2018 4:22 PM
To: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Subject: RE: 3rd party survey for SLG5854R against GA-SLP5372S - DOA: 22/10/2017

Dear Sharon,

Enclosed preliminary revised for SLG 5854R.

Kindly provide us the claim number.

Thank you.

Best Regards,

Janice Lee (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: janicelee@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAUTO)
Sent: Thursday, October 26, 2017 4:57 PM
To: 'Ng, Sharon' <Sharon.Ng@sg.gaig.com>; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: 3rd party survey for SLG5854R against GA-SLP5372S - DOA: 22/10/2017

Dear Sir/Mdm,

Thank you for the assignment.

Best Regards,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Ng, Sharon [mailto:Sharon.Ng@sg.gaig.com]
Sent: Thursday, 26 October, 2017 4:53 PM

To: SUR; assignments

Subject: RE: 3rd party survey for SLG5854R against GA-SLP5372S - DOA: 22/10/2017

Dear Sir

Please arrange to conduct TP survey.

Regards

Sharon Ng

Great American

From: sim@worldauto.com.sg [mailto:sim@worldauto.com.sg]

Sent: Thursday, October 26, 2017 3:50 PM

To: Ng, Sharon <Sharon.Ng@sg.gaig.com>

Subject: Re: 3rd party survey for SLG 5854R

Dear sir

Please arrange a 3rd party surveyor to survey the following car

Our client: SLG 5854R

Your Insured: SLP 5372S

Date of accident: 22/10/17

Regards

S.T.Sim

World Auto Pte Ltd

No 1 Kranji Loop

Singapore 739535

Mobile: 97588347

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The content of this e-mail message and any attachments are confidential and may be legally privileged, intended solely for the addressee. If you are not the intended recipient, be advised that any use, dissemination, distribution, or copying of this e-mail is strictly prohibited. If you receive this message in error, please notify the sender immediately by reply email and destroy the message and its attachments.

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 wilful 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	25/10/2017 09:32
Date Of Accident	22/10/2017 22:25
Exact Location Of Accident	TRANSIT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG5854R
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62414992

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID X (A)
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 HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

Driver

Name of Driver	HOO TAI PENG
NRIC No	S7118493E
Date Of Birth	27/05/1971
Occupation	OUTDOOR
Date Of Driving Pass	09/10/2003
Driving Experience	14 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PAID DRIVER

Vehicle Registration Number of Driver's Own Vehicle

-

-

-

Insurance Company of Driver's Own Vehicle

-

-

-

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 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. YES
Number of Passengers (Including Driver) 1

Details of Police Action

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

Circumstances of Accident

PLEASE REFER TO POLICE REPORT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLP5372S

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address


Email Address


Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

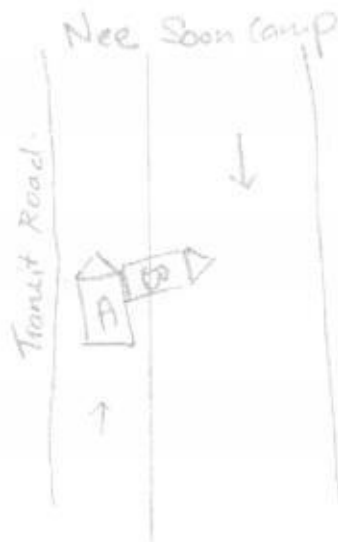
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts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

 23/10/17 14.21pm
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Car A SLG 5854R
Car B SLP 53725


Sketch Plan #2

Describe Circumstances of the Accident:


I was driving my Uber car SLG 5854R along Transit Rd towards Nee San Camp to fetch a passenger. When another vehicle in front a Honda Vezel SLP 5372 S made an illegal U turn (3 point turn be exact) and while reversing hit the side of my car.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



23/10/17 14:51pm

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

Witnessed by Reporting Centre Personnel

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20171023/2057

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

1 of 3

Report No. T/20171023/2057

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/10/2017 13:10		Vide Report No.:		Station Diary No.: 18	
Informant's Particulars					
Name of Informant: HOO TAI PENG			Address: 100/2/8		
ID Type / ID No.: NRIC NO / S7118493E			Contact No.: Home/Office: Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 46	Date of Birth: 27/05/1971	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: UBER DRIVER			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/10/2017 22:20	Type of Location: Straight Road
Location: Along Road 1 TRANSIT ROAD Towards Nee Soon Camp				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Rear to Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG5854R	Car	TOYOTA	Prilus	Silver	Slightly Damaged	0
SLP5372S	Car	HONDA	Vezel	Gold	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



2 of 3

Police Station Of Origin:
Tampines North NPP
481 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No 1800-7818999

Report No. T/20171023/2057

CONTINUATION OF REPORT

Driver			
Name	HOO TAI PENG		ID No S7118493E
Related Vehicle	NIL		Contact No
Hospital/Clinic	W Y TEH FAMILY CLINIC AND SURGERY		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	23/10/2017	Date Discharge	23/10/2017
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	Mr Teh		ID No. S1443575A
Related Vehicle	NIL		Contact No. 94241243
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	NIL	Degree of Injury	NIL

Brief Details.

On 22/10/2017 @ 2220hrs, I was driving my Uber car SLG5854R along Transit Rd towards Nee Soon Camp to fetch a passenger when another vehicle in front, a Gold Honda Vezel SLP5372S made an illegal U turn (3 point turn to be exact) an while reversing, his rear hit the side of my car. So we exchanged particulars and contact number. On 23/10/2017 when I woke up in the morning, I felt pain on my shoulder and lower back and decided to see the doctor.

I was given 3 days MC.

My vehicle sustained a dent to its right side of the car near the tyre.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20171023/2057

3 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No. 1800-7818999

Report No. T/20171023/2057

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sr Staff Sgt MOHAMMAD ABDULGHANI BIN
MOHD ADNAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SSI 2 SITIMARSITA BINTE BOHARI
Contact No.: 65476219

Authentication Stamp
NP158

Signature Of Informant:

Date/Time:
23/10/2017 13:10

Classification Of Case:



WORLD AUTO PTE LTD

47 Jalan Pemimpin #01-02/03

Halcyon 2, S'pore 577200

Tel No. : 6451 3933 Fax No. : 6455 7576

E-Mail : worldaut@singnet.com.sg

Website : www.worldauto.com.sg

Tax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

Great America Insurance Company

Estimate : ES00516

Date : 25/10/2017

Vehicle Num. : SLG 5854R (LCR)

Make/Model : TOYOTA PRIUS HYBRID

Chassis/Eng# :

Accident Date : 22/10/2017

Claim No. :

Reference :

Policy No. :

Attention : Motor Claim Department

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LIST ITEMS :

1.	1	FRONT LH FENDER (PIRUS) <i>✓ OT</i>		933.10
2.	1	FRONT LH HEADLAMP (PIRUS) <i>2X nn</i>		2,530.10
3.	1	FRONT BUMPER (PIRUS) <i>R</i>		495.50
4.	1	FRONT LH FENDER HYBRID EMBLEM (PIRUS) <i>✓ NEC</i>		52.30
5.	1	FRONT LH FENDER INNER LINER (PIRUS) <i>✓ TN</i>		198.40

List Total S\$:

4,209.40

25.00% Discount S\$:

1,052.35

3,157.05

SPECIAL NETT ITEMS :

1.	8	FRONT FENDER INNER COWLING CLIPS <i>✓ NEC</i>	9.80	78.40	<i>30</i>
----	---	---	------	-------	-----------

Special Nett Total S\$:

78.40

LABOUR :

To labour charge for removing F/L fender
and front bumper out to facilitate repairs and
replacement of damaged parts
To respray front bumper and F/L fender
To realign front headlamp

600.00

600.00

100.00

Labour Total S\$:

1,300.00

E. & O.E.

Total S\$:

4,535.45

=====

for WORLD AUTO PTE LTD

Sebastian. 27/10/2017.

[Signature]
11/11/17.

- Part by part repair.
 - Question Mark Item
 - Photo
 - Photo Before Paint
- 90036121

sebastianyeang@lkkauto.com.

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:

7 Jalan Pemimpin #01-02/03
 alcyon 2, S'pore 577200
 el No. : 6451 3933 Fax No. : 6455 7576
 -Mail : worldaut@singnet.com.sg
 ebsite : www.worldauto.com.sg
 ax Reg. No. : 200006765-H Buss. Reg. No. : 200006765H

1) Parts: \$ 792.52
2) S/Nett: \$ 30.00
3) Labour: \$ 940.00

\$ 1762.52 @ 4 days

Date : 25/10/2017
Vehicle Num. : SLG 5854R (LCR)
Make/Model : TOYOTA PRIUS HYBRID
Chassis/Eng# :
Accident Date : 22/10/2017
Claim No. :
Reference :
Policy No. :

Great America Insurance Company

Attention : Motor Claim Department

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LIST ITEMS :

LIST ITEMS :
FRONT LH FENDER (PIRUS) ✓ UT
FRONT LH HEADLAMP (PIRUS) ?
FRONT BUMPER (PIRUS) R
FRONT LH FENDER HYBRID EMBLEM(PIRUS) ✓ NCC
FRONT LH FENDER INNER LINER (PIRUS) ✓ TN

List Total S\$:
25.00% Discount S\$:

SPECIAL NETT ITEMS :

SPECIAL NETT ITEMS :
FRONT FENDER INNER COWLING CLIPS ✓ NRC

Special Nett Total S\$:

LABOUR :

LABOUR :
To labour charge for removing F/L fender
and front bumper out to facilitate repairs and
replacement of damaged parts
To respray front bumper and F/L fender
To realign front headlamp

Labour Total S\$:

E. & O.E.

Total S\$:	4,535.45
-------------	----------

for WORLD AUTO PTE LTD

Sebastian. 27/10/2017.

- Part by part repair.
- Question Mark Icon
Photo
- Photo Before Paint

90036121

sebastianyang@1kkanis.com.

LKK Auto Consultants hence notify
the Repairer of the following:

- To recover 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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17020544/Srbn2

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 07-02-2018



Code : GAI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLP 5372S	Veh. Inspected	SLG 5854R
Policy No.		Coverage (\$)	0.00
Claim No.	CLMOMVC000001474 (Grab)	Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	26/10/2017

2. Vehicle Particulars & Condition

Make & Model	TOYOTA PRIUS	c.c	1798
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JTDKB3FU003535374	Colour	SILVER
Odometer	92677	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Front Tyre	195/65 R15	YOKOHAMA	6 mm
R/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm
L/H Rear Tyre	195/65 R15	YOKOHAMA	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	22/10/2017	Inspection Date	27/10/2017
Survey held at	WORLD AUTO PTE LTD 47 JALAN PEMIMPIN #01-02/03 HALCYON 2 BLDG SINGAPORE 577200		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	4 Working Days
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Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLG 5854R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT LH FENDER (PRIUS)	DENTED	933.10	806.00
1	FRONT LH HEADLAMP (PRIUS)	NOT NECESSARY	2,530.10	-
1	FRONT BUMPER (PRIUS)	TO REPAIR SEE LABOUR	495.50	-
1	FRONT LH FENDER HYBRID EMBLEM (PRIUS)	NECESSARY	52.30	52.30
1	FRONT LH FENDER INNER LINER (PRIUS)	TORN	198.40	198.40
	LESS 25% DISCOUNT		-1,052.35	-264.18
			3,157.05	792.52
SPECIAL NETT ITEMS				
8	FRONT FENDER INNER COWLING CLIPS @\$9.80 (SN)	NECESSARY	78.40	30.00
			78.40	30.00
LABOUR				
	TO LABOUR CHARGE FOR REMOVING F/L FENDER AND FRONT BUMPER OUT TO FACILITATE REPAIRS AND REPLACEMENT OF DAMAGED PARTS.INCLUSIVE OF THE REPAIR OF FRONT BUMPER (PRIUS).		600.00	500.00
	TO RESPRAY FRONT BUMPER AND F/L FENDER.		600.00	400.00
	TO REALIGN FRONT HEADLAMP.		100.00	40.00
			1,300.00	940.00
GRAND TOTAL			4,535.45	1,762.52
RECOMMENDED COST OF REPAIRS				1,762.52

Report Ref No. CS/GAI17020544/Srbn2

YEANG WAI KEEN
Automotive Assessor

ADRIAN LING WAI PING
B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI
Licensed Appraiser

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