

ASS. R/C. BY:

REF: CS/MSG17021038/Seb

Special Instruction:

Survivor Sebastian

ASSIGNMENT (Office)

Mennen

From (Person): Elaine Ng

of MSLH

Date/Time: 02.11.2017 4:48pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SLC 9690R

Insured: SKR 5380U

at Workshop m/s Eurokars

Tel: 6360 2846

of 12 Sungai Kadut Ave

Policy No: 80406067DMX

Claim No: 534862

Sum Insured: _____ Excess: _____

Make of Veh:
(Client's Record)

D.O.A. 31.10.2017

13.11.2017 @ 10:30am - 11am

CA / REV / REP. / REV 24 HRS WPI

H.O.D. Endorsement: _____

Date/Time: 8:51am @ 3/11/2017

Person Contacted: EVA

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SLC 9690R - X
	SKR 5380U - X
14/11/17 @ 9:31am	RMSED to Elaine Ng via Mennen
	Confirm \$3130 - 4 days (Red: 7750.35 : 7 P/O)

REF: mslh

Surveyor: Melinda

ASSIGNMENT

From: _____ Date: 13.11.2017

Estimated Cost: _____

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

To Inspect Vehicle No: SLC 9690R

at Workshop m/s Eurocars

of 12 Sungai Kadut Ave

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: SLC 9690R Yr Regn: 2/11/2011

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

Truck / Trailer or _____

Make: Porsche Panamera c.c 1605

Colour: Silver A/C: Insured / Std / NI / NA

Sp.Reading: 59312 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WPO 62 2 97 ZC L000 990

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 255/45 ZR19

R: 285/40 ZR19

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

TOYO / YOKO or _____

<u>Front</u>		<u>Rear</u>	
R/Bal. <u>6</u> mm		R/Bal. <u>6</u> mm	
L/Bal. <u>6</u> mm		L/Bal. <u>6</u> mm	
D.O.A. <u>31/10/2017</u>		D.O.I. <u>13/11/2017</u>	

Survey held at Trans Eurocars

Des. of Damages: Frt / Rear / OD / NIS / UIC / Rooftop or

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

10:30 am - 11am

(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

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

Date / Time Action / Instruction

[Signature]
(13)2/2018

RECEIVED

Date/Time. File Pass to? : Preli. Report

1) 1312 Typist : Final Report

Date/Time. File Return to?

Days Of Repair: 4

Resurvey No. of Trip: —

Survey Fee: _____

Transportation: _____

) S + RS _____ \$

) Photos _____

) Others _____

TOTAL

300
10
310

Report Format: TP

Lump Sum / P.I.: (\$ 3130)

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)



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			
MSIG INSURANCE (SINGAPORE) PTE LTD		Ref : CS/MSG17021038/Stb	
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 03-11-2017	
Code : MSG			
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SKR 5380U	Veh. Inspected	SLC 9690R
Policy No.	80406067QMX	Coverage (\$)	0.00
Claim No.	534862	Excess (\$)	0.00
Assign From	MERIMEN (ELAINE NGU)	Assign Date	03/11/2017
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	31/10/2017	Inspection Date	
Survey held at	EUROKARS HABITAT PTE LTD NO.12 SUNGEI KADUT AVE SINGAPORE 729648		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	31 Oct 2017		02 Nov 2017 16:48 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	YEO TECK BENG, ID: S1424505G, Tel: +6598188525, Email: yeo.teckbeng@gmail.com								
Main Claimant:	SAYWYER NCHOLAS ROBERT, ID: G6110419X								
Vehicle Reg. No.:	SLC9690R	Date of Loss:	31/10/2017 07:00 - :59						
Claim Type:	TP / 534862	Policy/Cover Note No.:	80406067QMX (Comprehensive) Coverage: 23/06/2017 - 22/06/2018						
Vehicle Reg. No. (Insured):	SKR5380U	Policy No. (Claimant):							
Repairer:	Eurokars Centre (HQ) 12 SUNGEI KADUT AVENUE, 729648 Sungei Kadut - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 03/11/2017]								
Driver/Custodian (Insured):	YEO TECK BENG (57 / Male), NRIC: S1424505G, Tel: +6598188525								
Adj Asg. Remarks:	PLEASE CONTACT EVE @ 63602846 AS CAR NOT IN YET.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
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.									

Note: This document has not been finalised.**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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Elaine Ngu Siau Mei

Date: 14 Nov 2017

Preliminary Advice

Insured Vehicle No	: SKR5380U	Accident Date	: 31/10/2017
TP Vehicle No	: SLC9690R	Assignment Date	: 02/11/2017
Make	: PORSCHE PANAMERA	Est. Duration of Repair	: 3.00
Date of Inspection	: 13/11/2017		
Inspection At	: EUROKARS CENTRE (HQ) 12 SUNGEI KADUT AVENUE SINGAPORE 729648		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	10,880.75
Revised Amount	:S\$	3,130.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	3,130.00

Lump Sum Repair	:S\$	
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Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

- () The vehicle is economical/not economical for repair.
- (X) The above survey was conducted on a 'without prejudice' basis.

Denise Tay (LKKAuto)

From: Denise Tay (LKKAuto)
Sent: Tuesday, 13 February 2018 8:57 AM
To: 'mandy.chan@eurokars.com.sg'; Sebastian Yeang (LKK Auto); Admin A; Admin-D (LKKAuto)
Cc: jessicahs@eurokars.com.sg; stanley@eurokars.com.sg
Subject: RE: FINALIZATION SLC9690R

Dear Mandy,

Confirm \$3,130.00, 4days

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: mandy.chan@eurokars.com.sg [<mailto:mandy.chan@eurokars.com.sg>]
Sent: Monday, 12 February 2018 10:13 AM
To: Sebastian Yeang (LKK Auto) <SebastianYeang@lkkauto.com>; Admin A <admin-a@lkkauto.com>; Admin-D (LKKAuto) <admin-d@lkkauto.com>
Cc: jessicahs@eurokars.com.sg; stanley@eurokars.com.sg
Subject: RE: FINALIZATION SLC9690R

Dear LKK Team,

Please let us have your confirmation for this finalize by 14.02.18 (Wed), we will direct settle with Insurance company MSIG if still not get any confirmation from your side by this Wednesday.

Thank you,

Regards,
Mandy Chan
Admin Assistant

TRANS EUROKARS PTE LTD
12 Sungei Kadut Avenue
Singapore 729648
Tel: +65 63633003
DID: +65 63602436
Fax: +65 63602899

From: Mandy Chan
Sent: Wednesday, February 7, 2018 2:11 PM
To: 'sebastianyeang@lkkauto.com' <sebastianyeang@lkkauto.com>
Cc: Jessica Harry Shastri <jessicahs@eurokars.com.sg>
Subject: RE: FINALIZATION SLC9690R

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	31/10/2017 14:41
Date Of Accident	31/10/2017 07:10
Exact Location Of Accident	ALONG JALAN ANAK BUKIT JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC9690R
Insured/Policyholder	
Name Of Registered Owner	SAYWYER NCHOLAS ROBERT
Passport No/FIN	G6110419X
Email Address	NICK.SAWYER@THOMSONREUTERS.COM
Mobile Phone No	(LOCAL) +65-97767660
Alternative Phone No	OFFICE-97767660
Vehicle Particulars	
Manufacturer	PORSCHE
Model	PANAMERA-3.6 PDK (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USED
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	VPX/P1827982
Cover Note Number	
Driver	
Name of Driver	SAYWYER NCHOLAS ROBERT
Passport No/FIN	G6110419X
Date Of Birth	27/05/1969
Occupation	INDOOR
Date Of Driving Pass	27/10/2009
Driving Experience	8 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97767660
Fax Number	(LOCAL) +65-97767660
Contact Number	OFFICE-97767660
EMail Address	NICK.SAWYER@THOMSONREUTERS.COM

Address
 Postcode
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OWNER
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION
 Weather Conditions RAINING
 Road Surface WET

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) 2

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

REFER TO STATEMENT

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 SKR5380U
 Vehicle Make/Model/Colour
 Details Of Properties
 Name of Driver YEO TECK BENG
 NRIC/Passport Number S1424505G
 Contact Number 98188525
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

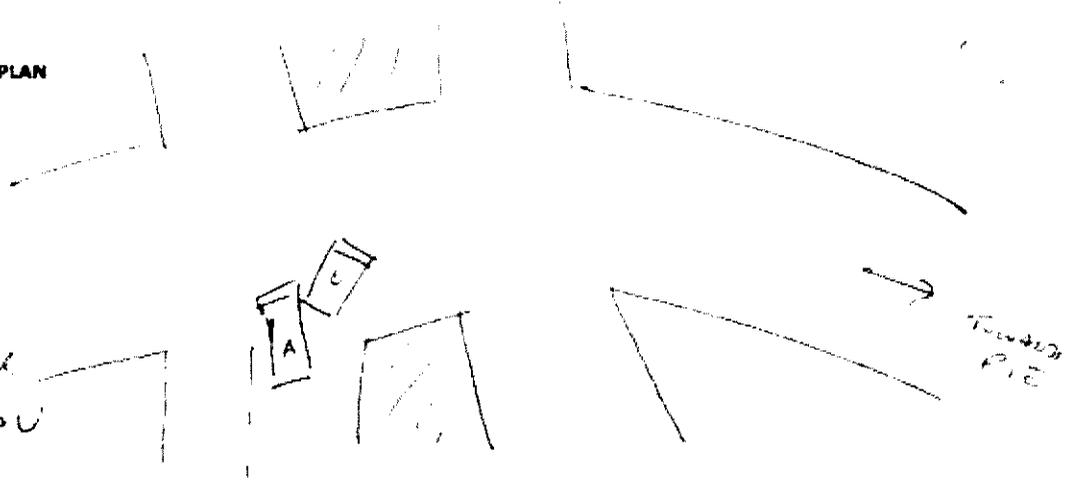
Details of Witness

Name
 Phone Number
 Email Address

Accident Sketch Plan

SKETCH PLAN

A = SUK 9630K
 B = SUK 5380U



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

~~Both parties moving to turn right~~

BOTH PARTIES MOVING TO TURN RIGHT
 CRUISE CONTROL SUDDENLY STOPPED.
 I SWAYED A LITTLE TO THE LEFT AND CAME TO A
 STOP.
 THEN THE CRUISE CONTROL STARTED TO REVERSE
 TOWARDS ME
 I HIT THE HORN BUT HE CONTINUED TO REVERSE -
 HITTING MY WING MIRROR AND THE SIDE OF MY
 CAR ON THE DRIVER'S SIDE

DECLARATION

I/We declare the foregoing particulars are true in every respect


 Policyholder's Signature
 Date & Time

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


 Reporting Officer/Personnel's Signature
 Name: JOHN LAWSON
 NRIC/ID No.

Individual Statement

SKETCH PLAN

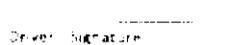
IMPORTANT NOTICE

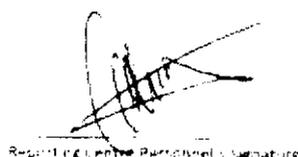
1. Please report correctly the details of the accident to speed up the claims process
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may 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 lodgment 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 making 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
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims
- (e) the information so collected under (d) above may be shared / disclosed
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time


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


Reporting Insurer's Signature
Name: Standard Life (Malaysia)
NRIC / FIN No.

STUTTGART AUTO
NO:12 SUNGEI KADUT AVE (S) 729648 (FAX NO. 63602899)
ESTIMATED COST OF REPAIRS

MSIG INSURANCE (SINGAPORE) PTE LTD 4 SHENTON WAY #21-01 SGX CENTRE 2 S 068807		NAME : Mr Sawyer Nicholas Robert ADDRESS : 11 Evelyn Road #13-01 Setia Residences Singapore 309304	WIP : 28916 DATE: 02.11.2017
ATTN : MOTOR CLAIMS DEPT	FAX : 62257402	TEL :	
VEH NO : SLC9690R	DATE IN :	CONTACT PERSON :	RICK 63602445
CHASSIS NO : WPOZZZ97ZCL000940	MILEAGE :	TYPE OF CLAIM :	TP AGAINST SKR5380U
MODEL : Porsche Panamera	DATE REG. : 21-11-11	POLICY NO. :	

NATURE OF WORKS

S/NO	Parts Description	QTY	PART NO	(NETT) PRICES
1	FRONT DOOR RH (00-GRV) R	1	P970-531-012-01-GRV	\$ 2,216.20
2	OVAL-HEAD SCREW ✓ NN	8	P999-073-920-30-	\$ 24.80
3	WASHER ✗ NN	8	P999-025-123-30-	\$ 16.80
4	P970-537-532-00-/ADDITIONAL GASKET ✗ NN	1	P970-537-532-01-	\$ 57.60
5	INSULATION DOOR ✗ NN	1	P997-537-551-00-	\$ 24.90
6	CAVITY PRESERVATION ✗ NN	1	P000-043-305-51-	\$ 86.00
7	INSULATION LOWER RH ✗ NN	1	P970-537-562-01-	\$ 68.80
8	SOUND ABSORBER ✗ NN	1	P999-911-737-40-	\$ 8.00
9	COVER ✗ NN	1	P970-731-720-01-	\$ 123.30
10	MIRROR HOUSING ✗ NN	1	P970-731-620-01-G2L	\$ 241.10
			SUB TOTAL	\$ 2,867.50
			LESS 10%	\$ 286.75
			Total Parts	\$ 2,580.75

Labour Description

1	TO REMOVE, REPAIR, REPLACE FRT RH DOOR & OTHER AFFECTED BODY PARTS INCLUDING PANEL BEAT / STRAIGHTEN BODY PANELS & FITTINGS WHICHEVER NECESSARY.		\$ 4,900.00
2	TO SPRAY PAINT FRT RH DOOR & RH WING MIRROR HOUSING-		\$ 1,800.00
3	TO CARRY OUT BODY CAVITY PRESERVATION TO ALL AFFECTED AREAS.		\$ 200.00
4	TO REMOVE / REFIT DOORS INCLUDE TRANSFER WINDOW MECHANISM FROM DAMAGE DOOR TO NEW DOOR & CHECK FUNCTION ABILITY	NETT	\$ 700.00
5	TO RE-PROGRAMMED SYSTEM & ERASE FAULT CODES AFTER ACCIDENT REPAIR.	NETT	\$ 600.00
6	SUNDRIES.		\$ 100.00
			30
		TOTAL LABOUR	\$ 8,300.00
		TOTAL PARTS	\$ 2,580.75
		GRAND TOTAL	\$ 10,880.75

Please note that this is **only an estimate**, base on our visual inspection. However should there be any additional work be

found necessary in the course of repair and thus additional parts, materials and labor cost will be deemed necessary, you will be informed accordingly prior to any action taken. In view of this, expected delays will be inevitable and therefore additional working days will be required. As such the loss of use and other incidentals will be adjusted accordingly.

Prepared By

Acknowledge By

3 days.

Sebastian .
13/11/2014 . 1045.
- Photo After 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:


22/11/17.

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	31 Oct 2017		02 Nov 2017 16:48 Edit Adj Rpt	S\$3,130.00 Edit Estimates	S\$3,130.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS				[Created by insurer]
Insured:	YEO TECK BENG, ID: S1424505G, Tel: +6598188525, Email: yeo.teckbeng@gmail.com			
Main Claimant:	SAYWYER NCHOLAS ROBERT, ID: G6110419X			
Vehicle Reg. No.:	SLC9690R	Date of Loss:	31/10/2017 07:00 - :59	
Claim Type:	TP / 534862	Policy/Cover Note No.:	80406067QMX (Comprehensive) Coverage: 23/06/2017 - 22/06/2018	
Vehicle Reg. No. (Insured):	SKR5380U	Policy No. (Claimant):		
		Excess:	S\$500.00	
Repairer:	Eurokars Centre (HQ) 12 SUNGEI KADUT AVENUE, 729648 Sungei Kadut - Tel:			
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Sebastian Yeang Wai Keen] ... [Final Rpt due 02/12/2017]			
Driver/Custodian (Insured):	YEO TECK BENG (57 / Male), NRIC: S1424505G, Tel: +6598188525			
Adj Asg. Remarks:	PLEASE CONTACT EVE @ 63602846 AS CAR NOT IN YET.			

ASSOCIATED MAIL RECEIVED	View All	Compose Case Mail
There are no mail for this case.		

ALL ASSOCIATED TASKS <input type="checkbox"/>										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

***SLC9690R (534862)**
[SKR5380U]
TP
SAYWYER NCHOLAS ROBERT
Oct 31 2017 7:00AM
[YEO TECK BENG]
Eurokars Centre

[Upload Documents](#) |
 [Upload Photos](#) |
 [Compose New Letter](#)

View [View in Browser](#) ▼

Assessment Reports			1 per page ▼	<input checked="" type="checkbox"/>	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	14/11/17 16:37	Adjuster Immediate Advice		Load HTM	

Photos/Images			3 per page ▼	<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
1	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
2	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
3	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
4	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
5	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
6	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
7	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
8	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
9	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
10	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
11	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
12	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
13	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
14	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>
15	13/02/18 09:10	General View		Load JPG	<input checked="" type="checkbox"/>

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: CS/MSG17021038/STBE2
Date: 21/02/2018

REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	80406067QMX
Claimant Vehicle No :	SLC9690R	Insured Vehicle No :	SKR5380U
Date of Loss:	31/10/2017	Nature of Claim:	TP
		Claim No:	534862

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SLC9690R	Engine No:	C02250
Make & Model:	PORSCHE PANAMERA, 3.6 PDK (A)	Chassis No:	WP0ZZZ97ZCL000940
Reg. Date:	21/11/2011 (Man. Year: 2011)	Odometer:	59312 km
Colour:	Silver		
Engine Capacity:	3605 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:

CONDITION OF TYRES

Front Tyre Size:	255/45Z R19	Rear Tyre Size:	185/40Z R19
Front Left Side:	Michelin 6 mm	Rear Left Side:	Michelin 6 mm
Front Right Side:	Michelin 6 mm	Rear Right Side:	Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	2,680.75	30.00	2,650.75	98.88
Miscellaneous Items	0.00	0.00	0.00	
Labour	8,200.00	3,100.00	5,100.00	62.20
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	10,880.75	3,130.00	7,750.75	71.23
+ GST 7.00/7.00% (S\$)	761.65	219.10	542.55	71.23
Nett Amount (S\$)	11,642.40	3,349.10	8,293.30	71.23

INSPECTION

Date of Assignment:	02/11/2017		
Date Inspected:	13/11/2017	Inspected At:	Eurokars Centre (HQ) 12 SUNGEI KADUT AVENUE Singapore 729648
Estimated Period of Repair:	4.0 days		

Adjuster: Sebastian Yeang Wai Keen

Manager: DENISE TAY KWEE CHENG

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: 21 Feb 2018)
Parts: 144 PORSCHE PANAMERA 3.6 PDK (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SLC9690R)
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		*FRONT DOOR RH (00-GRV)	Repair	2,216.20 FL	*- FL
2	8		*OVAL-HEAD SCREW	Not Necessary	24.80 FL	*- FL
3	8		*WASHER	Not Necessary	16.80 FL	*- FL
4	1		*P970-537-532-00-ADDITIONAL GASKET	Not Necessary	57.60 FL	*- FL
5	1		*INSULATION DOOR	Not Necessary	24.90 FL	*- FL
6	1		*CAVITY PRESERVATION	Not Necessary	86.00 FL	*- FL
7	1		*INSULATION LOWER RH	Not Necessary	68.80 FL	*- FL
8	1		*SOUND ABSORBER	Not Necessary	8.00 FL	*- FL
9	1		*COVER	Not Necessary	123.30 FL	*- FL
10	1		*MIRROR HOUSING	Not Necessary	241.10 FL	*- FL
11	1		*SUNDRIES	Necessary	100.00 FS	*30.00 FS

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

Sub Total (\$\$)	2,967.50	30.00
- List Item Discount on L Items 10.00/10.00% (\$\$)	286.75	0.00
Total Parts (\$\$)	2,680.75	30.00

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	TO REMOVE, REPAIR, REPLACE FRT RH DOOR & OTHER AFFECTED BODY PARTS INCLUDING PANEL BEAT / STRAIGHTEN BODY PANELS & FITTINGS WHICHEVER NECESSARY	New	4,900.00	1,400.00
2	TO SPRAY PAINT FRT RH DOOR & RH WING MIRROR HOUSING	New	1,800.00	1,000.00
3	TO CARRY OUT BODY CAVITY PRESERVATION TO ALL AFFECTED AREAS	New	200.00	100.00
4	TO REMOVE / REFIT DOORS INCLUDE TRANSFER WINDOW MECHANISM FROM DAMAGE DOOR TO NEW DOOR & CHECK FUNCTION ABILITY	New	700.00	0.00
5	TO RE-PROGRAMMED SYSTEM & ERASE FAULT CODES AFTER ACCIDENT REPAIR	New	600.00	600.00
Gross Labour Cost (S\$)			8,200.00	3,100.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >