

REF: CS/LAW17021382 /mltb sz

Special Instruction:

From (Person): Irene Lim of M Nedumaran ASSIGNMENT (Office)  
Estimated Cost: \_\_\_\_\_ Date/Time: 03-11-2017  
Bill to: \_\_\_\_\_

4s: \$ 13 000.00

Third Parties:

Claimant:

Surveyor: MC-WY Appraisers & Firstteam

Workshop: MW Brothers

OD/TP Re-inspection / Evaluation

To inspect Vehicle No: SKA 7010P  
 at Workshop m/s MW Brothers Auto  
 of 2 Kaki Bukit Ave 2  
 Policy No: BRR/7197/17/nin  
 Sum Insured: \_\_\_\_\_  
 Make of Veh: \_\_\_\_\_  
 (Client's Record)

Insured: GX 907A  
 Tel: 9670 1479 (Mr. Tan)  
 # 02-12  
 Claim No: MN.Z(1.M2).1611351  
 Excess: \_\_\_\_\_  
 D.O.A. 24.12.2016

Sum Insured: \_\_\_\_\_ Claim No: MN.7(7.M).1611351

Make of Veh: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record) \_\_\_\_\_ D.O.A. 24.12.2016

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ H.O.D. Endorsement/Date: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT \_\_\_\_\_

Confirmed with \_\_\_\_\_ Final Fig \_\_\_\_\_, \_\_\_\_\_ days (Red \$ \_\_\_\_\_ / \_\_\_\_\_ %; Original 12 days)  
Date/Time: 8/12/2019 Submit Final Fig 99001 - 10 days (Red \$ 3100 23 %; Original 12 days)  
Date/Time \_\_\_\_\_ Action/Instruction \_\_\_\_\_

Date/Time \_\_\_\_\_ Action/Instruction \_\_\_\_\_

Date/Time	Action/Instruction
	Submit a billing to both party.

6KA 7010P-X

$$G_X = YUTA - \bar{x}$$

6/12/20

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)
--

9-9.5k

RECEIVED 0 8 DEC 2011

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value :

1) Date/Time 8/12/17 File Pass to TYPKT

3) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

5) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

Inspected/  
Evaluated by:

2) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

4) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

6) Date/Time \_\_\_\_\_ File Return to \_\_\_\_\_

Fee Charged:

Basic &amp; Add

Transport

## Photos

Others

Total

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

\_\_\_\_\_

Surveyor

## 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: KA7010P Yr Regn: Feb, 06

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

Truck / Trailer or

Make: REPTA WASH. C.C. 1794Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 377491 T/Radio: Insured / Std / NI / NA

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

C/No: 2NE100285972

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60 R15

R: \_\_\_\_\_

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

TOYO / YOKO or HIIFCY

Front

R/Bal. 8 mmL/Bal. 8 mm

D.O.A.

Rear

R/Bal. 8 mmL/Bal. 8 mmD.O.I. 10/11/2017

Survey held at \_\_\_\_\_

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) \$ + RS. \$

) Photos

) Others

TOTAL

Report Format :

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

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

M NEDUMARAN & CO\*

Ref : CS/LAW17021382/M1tb

No. 11 SIN MING ROAD  
#B2-09 (UNIT 2), THOMSON V TWO  
SINGAPORE 575629

Date : 08-11-2017



Code : L134

## 1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)

Insured Veh.	GX 907A	Veh. Inspected	SKA 7010P
Policy No.	BRR/7197/17/rin	Coverage (\$)	0.00
Claim No.	MN.IG.M2.1611351	Excess (\$)	0.00
Assign From	IGENE LIM	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

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## 5. General Information

Accident Date	24/12/2016	Inspection Date	10/11/2017
Survey held at	2 KAKI BUKIT AVE 2 #02-02		
Repairer	MW BROTHERS AUTO REPAIRS		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

**Catherine Chong (LKK Auto)**

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**From:** Igene Lim <igene.lim@mneduco.com.sg>  
**Sent:** Friday, 3 November, 2017 11:15 AM  
**To:** 'SUR'; Celine Fong (LKKAuto); Catherine Chong (LKK Auto)  
**Cc:** 'Brij Raj Rai'; 'Shabbir'; Rina  
**Subject:** RE: MC6553/2017 Our Ref: BRR/7197/17/rin M Nedumaran Ref: MN.IG.M2.1611351

WITHOUT PREJUDICE

Our Ref : MN.IG.M2.1611351

Dear Mr Ma/Celine/Catherine,

Further to the email below from M/s JUstLaw LLC, we have made an arrangement for the Plaintiff's vehicle **SKA 7010P** to be available for re-inspection on:

**Date** : 10 November 2017 (Saturday)  
**Time** : 4.00 p.m.  
**Venue** : MW Brothers Auto Repair  
2 Kaki Bukit Avenue 2, #02-02, Kaki Bukit Autohub  
**Contact** : Mr Tan @ 9670-4479

Please let us have your written confirmation on the above arrangement soonest possible.

With thanks & regards,

**IGENE LIM (MS)**

*(For and on behalf of Mr Nedumaran Muthukrishnan)*

**M NEDUMARAN & CO**

**Advocates & Solicitors**

**Commissioner for Oaths**

Branch Office :

No. 11 Sin Ming Road

#B2-09 (Unit 2), Thomson V Two

Singapore 575629

Tel : 6509-8480 / 6509-8481

Fax : 6509-8482

Email : [igene.lim@mneduco.com.sg](mailto:igene.lim@mneduco.com.sg)

**IMPORTANT NOTE:** This electronic mail transmission (including any attachments) is private and confidential and may contain legally privileged information. If you are not the intended recipient, you may not use, copy or disseminate the information contained herein. Please delete this message and its attachments immediately and contact us at (65) 6509-8480 if you have received this message in error. Thank you.

**From:** Rina [mailto:[rina@justlaw.com.sg](mailto:rina@justlaw.com.sg)]

**Sent:** Friday, November 3, 2017 9:51 AM

To: 'SUR' <sur@lkkauto.com>

Cc: 'Brij Raj Rai' <brijrai@justlaw.com.sg>; Igene Lim <igene.lim@mneduco.com.sg>; 'Shabbir' <shabbir@justlaw.com.sg>

Subject: MC6553/2017 Our Ref: BRR/7197/17/rin M Nedumaran Ref: MN.IG.M2.1611351

Dear Mr Ma Chin Fook,

We are acting on the instructions of Income MC/MC 6553/2017 which arose out of the accident on 24 December 2016 along the slip road of Paya Lebar Road towards Bartley Road involving the Plaintiff's motor car no. SKA7010P and the Defendant's motor van no. GX907A. The Plaintiff's solicitor are M/s M Nedumaran & Co.

Both the Plaintiff and Defendant engaged their respective surveyor as follows:-

1. The Plaintiff had engaged Mc-Coy Appraiser Pte Ltd which issued a survey report recommending COR at \$13,000 on lump sum basis and 12 days for repairs.
2. Income had engaged Formteam which issued a survey report recommending COR at \$7,150 on lumpsum basis and 8 days for repairs.

However, there is a dispute relating to the quantum for cost of repairs and loss of use.

Please note that both parties have agreed for Mr Ma Chin Fook to be appointed as SJE in this matter and to conduct inspection on the Plaintiff's car.

Attached please find copies of the following:-

1. Mc-Coy's survey report with photographs of the Plaintiff's car;
2. Formteam's survey report with photographs of the Plaintiff's car;
3. Plaintiff's GIA report;
4. Defendant's GIA report.

You may liaise directly with the Plaintiff's solicitors, M/s M Nedumaran & Co at their email, [igene.lim@mneduco.com.sg](mailto:igene.lim@mneduco.com.sg) or fax at 6509 8482 to arrange for an appointment to conduct the survey on the Plaintiff's car.

We would appreciate it if you can attend to this matter and ensure that the SJE report is issued and submitted to both parties' solicitors as soon as possible.

Thanks & Regards

**Brij Rai / Rina**  
M/s Just Law LLC  
Tel: 6226 1961

## 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	27/12/2016 11:46
Date Of Accident	24/12/2016 13:00
Exact Location Of Accident	SLIP ROAD (UPP PAYA LEBAR RD) TURN TO BARTLEY RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA7010P
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#### Insured/Policyholder

Name Of Registered Owner	YY AUTO REPAIRS
Co Reg No	53207290A
Email Address	igene_mnc@outlook.com
Mobile Phone No	(LOCAL) +65-91051141
Alternative Phone No	Office-96704479

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (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	Commercial Vehicle

#### Insurance Company

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type Of Coverage	Third Party Fire and/or Theft
Fleet Policy	No
Policy Number	5083112140
Cover Note Number	16/08/2016 TO 15/08/2017

#### Driver

Name of Driver	GOH TECK HONG
NRIC No	S0035753G
Date Of Birth	04/02/1953
Occupation	Indoor
Date Of Driving Pass	15/03/1973
Driving Experience	43 Years And 9 Months
Gender	Male
Mobile Number	(Local) +65-91051141
Fax Number	
Contact Number	Others-96704479
Email Address	robingoh2002@yahoo.com.sg



Address APT BLK 104 WOODLANDS STREET 13 #07-208 SINGAPORE 730104

Postcode

Was driver an employee of the Insured's Company No

If No, Relationship of the Driver with the Insured Other - RENTAL

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 (TP Hit Insured)

Weather Conditions Clear

Road Surface Dry

#### Other Information

Was any foreign vehicle involved in this accident? No

Was any body injured in the Accident? Yes

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? Yes

If Yes, Please state which Police Station

Police Station Name Bukit Panjang North Neighbourhood Police Post

Police Station Address ROAD: Blk 27 Marsiling Drive , POSTCODE: 730027 , COUNTRY: Singapore

Police Station Contact TEL NO: 1800-3689999 - FAX NO: 63682383

Was notice of intended Prosecution given? No

If Yes, against whom?

#### Circumstances of Accident

REFER WITH POLICE REPORT T/20161225/2055

#### Attachment(s)

Are accident photos available for attachment? Yes

Was there any video captured by Car Camera? No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GX907A

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

#### DETAILS OF INJURED PERSON 1

Name	GOH TECK HONG / S0035753G
Approximate Age	
Injuries Sustain	TAN TOCK SENG HOSPITAL - 3 DAYS OF MEDICAL LEAVE
Injured person in which vehicle?	SKA7010P
Were seat belts worn?	Yes
Was injured conveyed to hospital by ambulance?	Yes
Address	APT BLK 104 WOODLANDS ST 13 #07-208 SINGAPORE 730104
Postcode	



**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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



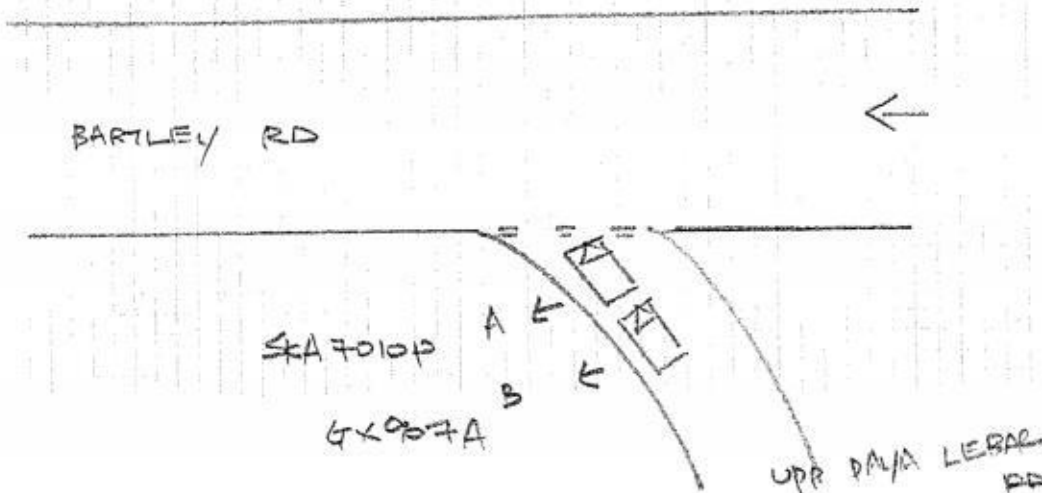
Policyholder's Signature / Date & Time

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

REFER WITH POLICE REPORT.

Insurance Co. MLC MOTOR INSURANCE  
 Vehicle No. SEA 7010P Date of Accident 24/12/2016  
☐ Reporting Only  
☐ Own Damage Claim  
☒ Third Party Claim  
☒ Other Workshop

## Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature] 27/12/16 1159 hrs  
 Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**



T/20161225/2055

1 of 3

Police Station Of Origin:  
Bukit Panjang North NPP  
27 Marsiling Drive #01-237 SINGAPORE  
730027  
Tel No: 1800-3689999

Report No. T/20161225/2055

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/12/2016 13:58		Vide Report No.:		Station Diary No.: 19	
<b>Informant's Particulars</b>					
Name of Informant: GOH TECK HONG			Address: APT BLK 104 WOODLANDS STREET 13 #07-208 SINGAPORE 730104		
ID Type / ID No.: NRIC NO / S0035753G			Contact No.: Home/Office: Mobile: 91051141		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 63	Date of Birth: 04/02/1953	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 24/12/2016 13:00	Type of Location: SLIP ROAD
Location: Along Road 1 UPPER PAYA LEBAR ROAD BARTLEY ROAD SLIP ROAD (UPPER PAYA LEBAR ROAD) ENTERING TO BARTLEY ROAD Lamp Post Number: 43S1				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GX907A	Van	CITROEN	BERLINGO 1.9	Blue		0
SKA7010P	Car	TOYOTA	WISH 1.8A	Grey	Slightly Damaged	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20161225/2055

2 of 3

Police Station Of Origin:  
Bukit Panjang North NPP  
27 Marsiling Drive #01-237 SINGAPORE  
730027  
Tel No: 1800-3689999

Report No. T/20161225/2055

**CONTINUATION OF REPORT**

Driver			
Name	GOH TECK HONG	ID No.	S0035753G
Related Vehicle	SKA7010P (Car)	Contact No.	91051141
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	24/12/2016	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 24/12/2016 at about 1200hrs, I was driving my vehicle with registration no: SKA7010P along Upper Paya Lebar Road towards the direction of Lor Ah Soo. As I was approaching the junction of Upper Paya Lebar Road X Bartley Road, I proceed to my left and enter the slip road to enter Bartley Road. As there were still oncoming vehicle, I brake to a stop before the white line. After a few seconds, I felt a strong impact from the rear which causes my vehicle to move forward. Subsequently another impact came afterwards.

Ambulance came to scene and I was then conveyed to Tan Tock Seng Hospital. I felt neck and back pain. I was then given 3 days of medical leave from 24/12/16 to 26/12/16. There is in-car camera inside my vehicle but is only facing the front. No government property was damaged. Officer namely TP Daniel HP:9189 9972 contacted me to make a police report.



**SINGAPORE  
POLICE FORCE**



T/20161225/2055

3 of 3

Report No. T/20161225/2055

Police Station Of Origin:  
Bukit Panjang North NPP  
27 Marsiling Drive #01-237 SINGAPORE  
730027  
Tel No: 1800-3689999

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.

SN 127

Signature Of Officer Recording The Report:

J/

Staff Sgt ABDUL SHYUKUR BIN SAPUAN

Signature:

Signature Of Interpreter:

Not applicable

Signature Of Informant:

Date/Time:

25/12/2016 13:58

Classification Of Case:

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MUHAMMAD HANAFI BIN AZLAN

Contact No.: 65476437

Authentication Stamp

NP168

## 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	24/12/2016 15:54
Date Of Accident	24/12/2016 12:30
Exact Location Of Accident	UPPER PAYA LEBAR RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX907A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	INFINITY NETWORKS SOLUTIONS PTE LTD
Co Reg No	201127788H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-90000000

### Vehicle Particulars

Manufacturer	CITROEN
Model	BERLINGO-1.6 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Commercial Vehicle

### Insurance Company

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type Of Coverage	Third Party
Fleet Policy	No
Policy Number	5051828173-04
Cover Note Number	

### Driver

Name of Driver	APOLONIO JESUS JR ISIDRO
Passport No/FIN	G5066251P
Date Of Birth	01/02/1984
Occupation	Outdoor
Date Of Driving Pass	15/07/2011
Driving Experience	5 Years And 5 Months
Gender	Male
Mobile Number	(Local) +65-93382097
Fax Number	
Contact Number	
EMail Address	NOEMAIL



Address	BLK 1016 #01-145 GEYLANG EAST AVENUE 3
Postcode	389731
Was driver an employee of the Insured's Company	Yes
If No, Relationship of the Driver with the Insured	
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 (Insured Hit TP)
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	Yes
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?	Yes
If Yes, Please state which Police Station	
Police Station Name	Boon Teck Neighbourhood Police Post
Police Station Address	<b>ROAD:</b> Blk 207 Toa Payoh North , <b>POSTCODE:</b> 310207 , <b>COUNTRY:</b> Singapore
Police Station Contact	<b>TEL NO:</b> 1800-2549999 - <b>FAX NO:</b> 63554310
Was notice of intended Prosecution given?	No
If Yes, against whom?	

#### Circumstances of Accident

AS PER POLICE REPORT NO.T/20161224/2083.ATTENDED BY SITI

#### Attachment(s)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA7010P
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)	2

#### Details of Witness

Name	
Phone Number	
Email Address	

#### DETAILS OF INJURED PERSON 1



Name	DRIVER
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKA7010P
Were seat belts worn?	Yes
Was injured conveyed to hospital by ambulance?	Yes
Address	
Postcode	

## 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 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 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

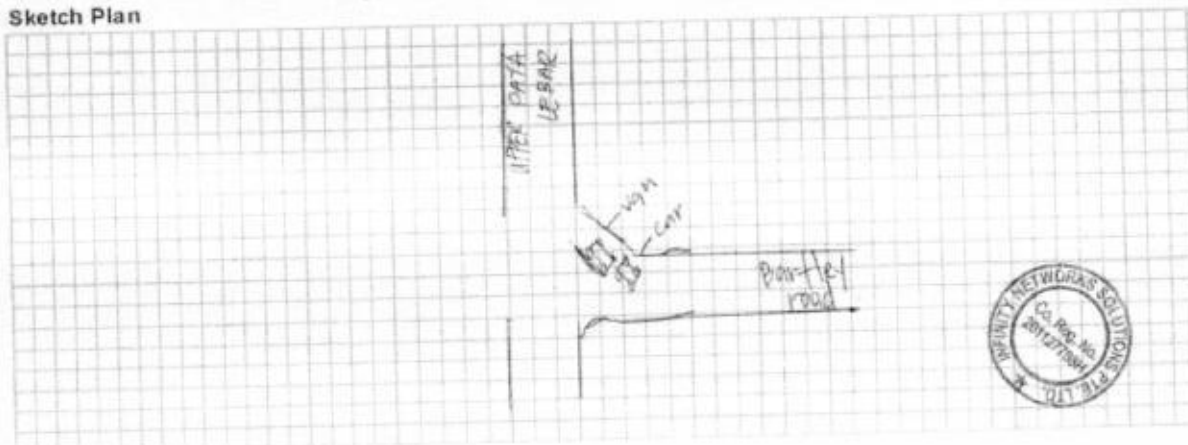
*[Signature]*  
Driver's Signature (if driver is not the policyholder) / Date & Time

24 DEC 2016

**ADAC KARI BUKIT (VAC)**  
23 Kaki Bukit Ave 4  
Singapore 415933  
Tel: 6741 6697  
Fax: 6749 2305  
Email: [vackb@singnet.com.sg](mailto:vackb@singnet.com.sg)

Witnessed by Reporting Centre Personnel

#### Sketch Plan



Sketch Plan #2

Describe Circumstances of the Accident

Refer to Police Report.



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

24 DEC 2016

IDAC KAKI BUKIT (VAC)  
23 Kaki Bukit Ave 4  
Singapore 415933  
Tel: 6741 6697  
Fax: 6749 2305  
Email: vackb@singnet.com.sg

Witnessed by Reporting Centre Personnel

## Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20161224/2083

1 of 3

Police Station Of Origin:  
Boon Teck NPP  
207 Toa Payoh North #01-1231 SINGAPORE  
310207  
Tel No: 1800-2549999

Report No. T/20161224/2083

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/12/2016 14:53		Vide Report No.: E/20161224/0089		Station Diary No.: 14	
<b>Informant's Particulars</b>					
Name of Informant: APOLONIO JESUS JR ISIDRO			Address: APT BLK 242 SERANGOON AVENUE 3 #08-196 SINGAPORE 550242		
ID Type / ID No.: FIN NO / G5066251P			Contact No.: Home/Office: Mobile: 93382097		
Nationality: FILIPINO			Email:		
Sex: Male	Age: 32	Date of Birth: 01/02/1984	Type of Informant: Driver		
Race: Others			Language:		Institution / School Name:
Occupation: ENGINEER, TELECOMMUNICATIONS			Driving Licence Information: Class: 2B,3,3C		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/12/2016 12:30	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 UPPER PAYA LEBAR ROAD BARTLEY ROAD On the slip road of Upper Paya Lebar Road towards Bartley Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GX907A	Van				Slightly Damaged	2
SKA7010P	Car				Slightly Damaged	1

## Details of Person Involved

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

## Sketch Plan #4



**SINGAPORE  
POLICE FORCE**



T/20161224/2083

2 of 3

Police Station Of Origin:

Boon Teck NPP

207 Toa Payoh North #01-1231 SINGAPORE

310207

Tel No: 1800-2549999

Report No. T/20161224/2083

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	APOLONIO JESUS JR ISIDRO		ID No. G5066251P
Related Vehicle	GX907A (Van)		Contact No. 93282097
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3,3C Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Unknown		ID No. NIL
Related Vehicle	SKA7010P (Car)		Contact No. NIL
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	Slight

**Brief Details.**

On 24/12/2016 at about 1230hrs, I was driving along Upper Paya Lebar Road heading towards Bartley Road. As I was approaching the slip road which is a one lane road leading towards Bartley Road, I looked right to check my blind spot for oncoming vehicles before merging.

At this point of time, my vehicle was still in motion. As I turn to look forward, I noticed my vehicle coming into close contact with a car that is in front of me. I did not have time to apply brakes and as such, came into collision.

I immediately went out of my vehicle to check the other driver. After which, I called for ambulance as he had complained of giddiness. Shortly after, I made a call to NTUC (insurance) whom I believe had called for police. I wish to inform that I did not manage to exchange any particulars with the other driver as he was conveyed by ambulance. I do not have any in-vehicle camera. I am not injured currently. The damage sustained to my vehicle includes dents on the front bumper and front hood.

I am currently staying at Blk 405 Serangoon Avenue 1 #03-59 S(550405).

Sketch Plan #5



SINGAPORE  
POLICE FORCE



T/20161224/2083

3 of 3

Police Station Of Origin:  
Boon Teck NPP  
207 Toa Payoh North #01-1231 SINGAPORE  
310207  
Tel No: 1800-2549999

Report No. T/20161224/2083

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:

E /

Sgt MUHAMAD NABIL BIN ROSLI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MUHAMMAD HANAFI BIN AZLAN

Contact No.: 65476437

Signature Of Informant:

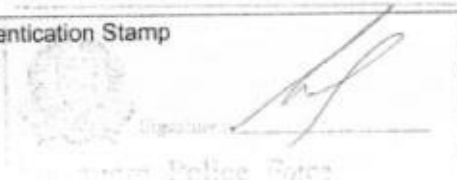
Date/Time:

24/12/2016 14:53

Classification Of Case:

Authentication Stamp

NP168



# MC-COY

APPRAISER PTE LTD

No 1 Kaki Bukit Avenue 6 #01 - 28 AutoBay @ Kaki Bukit Singapore 417883 Tel: 6748 6653 Fax: 6747 1017  
Registration No.: 200723252D

Invoice No 16053-12/MY

Billing Name & Address

Date 9 Jan 2017

YY Auto Repairs  
c/o No 2 Kaki Bukit Ave 2  
#02-02 Kaki Bukit AutoHub  
Singapore 417921

Vehicle No : SKA 7010 P

Model : Toyota Wish

Item	Descriptions	Amount S\$
1	Date of inspection : <u>28 Dec 2016</u> A copy of the inspection / survey report Correspondence, postages and etc.	
2	Photography Services - Develop photographs - Storage of digital photographs - Submission of photographs <u>131</u> copies	
3	Transportation Charges	
	Total	<u>\$ 851.00</u>
	SDLS : EIGHT HUNDRED AND FIFTY-ONE ONLY	

Notes :

1. All cheque payment should be "Crossed" and made payable to "Mc-Coy Appraiser Pte. Ltd."
2. All cheque should have our "Invoice No." written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



Official Stamp

E & O. E



# MC-COY

APPRAISER PTE LTD

No 1 Kaki Bukit Avenue 6 #01 - 28 AutoBay @ Kaki Bukit Singapore 417883 Tel: 6748 6653 Fax: 6747 1017  
Registration No.: 200723252D

Report Reference : TP / 16053-12/MY / 2016  
Date of Report : 9 Jan 2017

YY Auto Repairs  
c/o No 2 Kaki Bukit Ave 2  
#02-02 Kaki Bukit AutoHub  
Singapore 417921

## THIRD PARTY SURVEY ACCIDENT HAPPENED ON 24 Dec 2016

Workshop Address : M. W. Brothers Auto Repair  
No 2 Kaki Bukit Ave 2  
#02-02 Kaki Bukit AutoHub  
Singapore 417921

As per your instruction dated 28 Dec 2016 with regard to the above matter. We have carried out a physical inspection on the said vehicle SKA 7010 P. We enclosed herewith our report and findings as follows:

### 1. VEHICLE PARTICULARS

Registration No : SKA 7010 P  
Model : Toyota Wish  
Year / Capacity : 2006/1794  
Chassis No : ZNE10-0285972

Engine No : 1ZZ2468959  
Mileage : 300838  
Colour : Grey

### 2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>		<u>Rim</u>
FRONT O/S	: 195/65 R15	Hifly	5.00	mm	Sport
REAR O/S	: 195/65 R15	Hifly	5.00	mm	Sport
FRONT N/S	: 195/65 R15	Hifly	5.00	mm	Sport
REAR N/S	: 195/65 R15	Hifly	5.00	mm	Sport

3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the rear portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : 12 working days to complete.
5. Enclosed number of photograph : 131 copies.
6. In accordance to your instruction, we have **Not Authorised** repair to the vehicle and the survey was done on a **"Without Prejudice"** basis. We hope that this report will be of assistance to you in dealing with the matter.
7. Should you discover any discrepancy in the report, please kindly notify us **within 2 weeks**, or the report will be treated as correct.

Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No: SKA 7010 P  
Report No: TP/ 16053-12/MY / 2016

**SPARE PARTS**

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Rear tailgate	Damage	\$ 1460.80	\$ 1460.80 ✓
1	Rear tailgate outer chrome moulding	Damage	\$ 383.85	\$ 383.85 ✓
2	Rear tailgate dampers	Damage	\$ 422.94	\$ 422.94 X
2	Rear tailgate hinges	Intact <i>sv</i>	\$ 171.11	\$ 171.11 ✓
1	Rear tailgate inner trim board	Damage	\$ 485.51	\$ 485.51 ✓
1	Rear tailgate lock	Damage	\$ 497.37	\$ 497.37 ✓
1	Rear tailgate logo	Necessary	\$ 68.50	\$ 68.50 ✓
1	Rear tailgate rubber	Damage	\$ 370.50	\$ 370.50 ✓
1	Rear wiper motor	Intact <i>sv</i>	\$ 629.55	\$ 629.55 ✓
2	Rear taillamps	Damage	\$ 857.00	\$ 857.00 ✓
2	Rear taillamp panels	Damage	\$ 594.00	\$ 594.00 X
1	Rear outer end panel	Damage	\$ 519.80	\$ 519.80 ✓
1	Rear inner end panel	Damage	\$ 398.50	\$ 398.50 ✓
1	Rear end panel inner trim	Damage	\$ 296.50	\$ 296.50 ✓
1	Rear bumper	Damage	\$ 1285.57	\$ 1285.57 ✓
2	Rear bumper brackets	Damage	\$ 111.20	\$ 111.20 ✓
1	Rear bumper reflector	Damage	\$ 68.50	\$ 68.50 X
2	Rear bumper side retainers	Necessary	\$ 128.86	\$ 128.86 ✓
1	Rear floor panel	Damage	\$ 827.55	\$ 827.55 X
1	Rear spare tyre carrier	Damage	\$ 497.35	\$ 497.35 ✓
1	Rear exhaust silencer	Damage	\$ 822.60	\$ 822.60 ✓
2	Rear exhaust silencer mountings	Necessary	\$ 97.20	\$ 97.20 ✓
1	Rear fender	Damage	\$ 1013.50	\$ 1013.50 X
2	Rear fender inner trim boards	Damage	\$ 1193.04	\$ 1193.04 ✓
1	Rear fender quarter glass seal	Damage	\$ 110.10	\$ 110.10 X
			\$ 13311.40	\$ 12510.74
	Discount	10.0%	\$ 1331.14	\$ 1251.07
			\$ 11980.26	\$ 11259.67
<u>Special Nett Items</u>				
1	Rear windscreen sealant	Necessary	\$ 60.00	\$ 60.00 ✓
1	Rear windscreen inner foam tape	Necessary	\$ 80.00	\$ 80.00 ✓
1	Rear bumper clip (1 set)	Necessary	\$ 45.00	\$ 45.00 ✓
1	Rear reverse sensor (1 set)	Damage	\$ 280.00	\$ 220 280.00 ✓
1	Rear reverse camera	Damage	\$ 480.00	\$ 350 480.00 ✓
1	Rear floor panel insulator	Necessary	\$ 180.00	\$ 180.00 ✓
1	Rear fender quarter glass sealant	Necessary	\$ 80.00	\$ 40.00 X
			\$ 1205.00	\$ 1165.00
<b>Spare Parts Total</b>			<b>\$ 13185.26</b>	<b>\$ 12424.67</b>

Vehicle No: SKA 7010 P  
Report No: TP/ 16053-12/MY / 2016

# LABOUR COST

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 13185.26	\$ 12424.67
1	To disconnect and reconnect, check electrical wiring, harness wires, sockets, replace damaged parts.	\$ 50.00	\$ 40.00 30
2	To remove and refit inner trims, inner garnishes, to facilitate the repairs.	\$ 220.00	\$ 140.00 80
3	To remove and refit fuel tank system.	\$ 110.00	\$ 60.00 x
4	To remove and refit rear bumper sensor.	\$ 120.00	\$ 80.00 60
5	To remove and refit rear windscreen glass.	\$ 180.00	\$ 120.00 ✓
6	To remove and refit quarter glass to facilitate the repairs.	\$ 120.00	\$ 60.00 x
7	To remove and refit, straighten and re-adjust exhaust pipe and replace rear exhaust silencer and mountings.	\$ 150.00	\$ 80.00 ✓
8	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and weld body panels. To re-adjust to the original position using power tools.	\$ 1800.00	\$ 1540.00 1300
9	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$ 1800.00	\$ 1540.00 1200
10	To apply undercoating on the repaired and replaced panels for rust protection.	\$ 250.00	\$ 150.00 100
Total		\$ 17985.26	\$ 16234.67

10 w/days.

Vehicle No: SKA 7010 P  
Report No: TP/ 16053-12/MY / 2016

**LABOUR COST**

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
Total c/f		\$ 17985.26	\$ 16234.67

The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair Contract of:

\$ 13000.00

SDLS: THIRTEEN THOUSAND ONLY

  
\_\_\_\_\_  
Qualified Appraiser




# 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			
JUST LAW LLC*		Ref : CS/LAW17021382/M1tbs2	
101 CECIL STREET #12-12 TONG ENG BUILDING SINGAPORE 069533		Date : 12-12-2017	
		Code : L028	
<b>1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)</b>			
Insured Veh.	GX 907A	Veh. Inspected	SKA 7010P
Policy No.	5051828173-04	Coverage (\$)	0.00
Claim No.	BRR/7197/17rin	Excess (\$)	0.00
Assign From	IGENE LIM	Assign Date	03/11/2017
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	TOYOTA WISH	c.c	1794
Engine No.	HIDDEN	Year of Reg.	2006
Chassis No.	ZNE100285972	Colour	SILVER
Odometer	377491	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre	185/60R15	HIFLY	8 mm
L/H Front Tyre	185/60R15	HIFLY	8 mm
R/H Rear Tyre	185/60R15	HIFLY	8 mm
L/H Rear Tyre	185/60R15	HIFLY	8 mm
<b>4. Description of Damages</b>			
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.			
<b>5. General Information</b>			
Accident Date	24/12/2016	Inspection Date	10/11/2017
Survey held at	2 KAKI BUKIT AVE 2 #02-02		
Repairer	MW BROTHERS AUTO REPAIRS		
<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:		10 Working Days	



# 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

M NEDUMARAN & CO\*

Ref : CS/LAW17021382/M1tbs2

No. 11 SIN MING ROAD  
#B2-09 (UNIT 2), THOMSON V TWO  
SINGAPORE 575629

Date : 12-12-2017



Code : L134

## 1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)

Insured Veh.	GX 907A	Veh. Inspected	SKA 7010P
Policy No.	5051828173-04	Coverage (\$)	0.00
Claim No.	MN.IG.M2.1611351	Excess (\$)	0.00
Assign From	IGENE LIM	Assign Date	03/11/2017

## 2. Vehicle Particulars & Condition

Make & Model	TOYOTA WISH	c.c	1794
Engine No.	HIDDEN	Year of Reg.	2006
Chassis No.	ZNE100285972	Colour	SILVER
Odometer	377491	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	185/60R15	HIFLY	8 mm
L/H Front Tyre	185/60R15	HIFLY	8 mm
R/H Rear Tyre	185/60R15	HIFLY	8 mm
L/H Rear Tyre	185/60R15	HIFLY	8 mm

## 4. Description of Damages

THE VEHICLE HAD COMPLETED ITS REPAIR WORKS.  
REPAIR CONDITION SEE DETAILS.

## 5. General Information

Accident Date	24/12/2016	Inspection Date	10/11/2017
Survey held at	2 KAKI BUKIT AVE 2 #02-02		
Repairer	MW BROTHERS AUTO REPAIRS		

## 5a. Remarks

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

## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: 10 Working Days





# 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

Page No.:1 of 3

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKA 7010P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR TAILGATE	REPLACED	1,460.80	1,460.80
1	REAR TAILGATE OUTER CHROME MOULDING	REPLACED	383.85	383.85
2	REAR TAILGATE DAMPERS	NOT NECESSARY	422.94	-
2	REAR TAILGATE HINGES	SERVICEABLE	171.11	-
1	REAR TAILGATE INNER TRIM BOARD	REPLACED	485.51	485.51
1	REAR TAILGATE LOCK	REPLACED	497.37	497.37
1	REAR TAILGATE LOGO	REPLACED	68.50	68.50
1	REAR TAILGATE RUBBER	REPLACED	370.50	370.50
1	REAR WIPER MOTOR	SERVICEABLE	629.55	-
2	REAR TAILLAMPS	REPLACED	857.00	857.00
2	REAR TAILLAMP PANELS	NOT NECESSARY	594.00	-
1	REAR OUTER END PANEL	REPLACED	519.80	519.80
1	REAR INNER END PANEL	REPLACED	398.50	398.50
1	REAR END PANEL INNER TRIM	REPLACED	296.50	296.50
1	REAR BUMPER	REPLACED	1,285.57	1,285.57
2	REAR BUMPER BRACKETS	REPLACED	111.20	111.20
1	REAR BUMPER REFLECTOR	NOT NECESSARY	68.50	-
2	REAR BUMPER SIDE RETAINERS	REPLACED	128.86	128.86
1	REAR FLOOR PANEL	NOT NECESSARY	827.55	-
1	REAR SPARE TYRE CARRIER	REPLACED	497.35	497.35
1	REAR EXHAUST SILENCER	REPLACED	822.60	822.60
2	REAR EXHAUST SILENCER MOUNTINGS	REPLACED	97.20	97.20
1	REAR FENDER	NOT NECESSARY	1,013.50	-
2	REAR FENDER INNER TRIM BOARDS	REPLACED	1,193.04	1,193.04
1	REAR FENDER QUARTER GLASS SEAL	NOT NECESSARY	110.10	-
	LESS 10% DISCOUNT		-1,331.14	-947.42
			11,980.26	8,526.73
<b>SPECIAL NETT ITEMS</b>				
1	REAR WINDSCREEN SEALANT (SN)	REPLACED	60.00	60.00
1	REAR WINDSCREEN INNER FOAM TAPE (SN)	REPLACED	80.00	40.00

Report Ref No. CS/LAW17021382/M1tbs2



# 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

Page No.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	SET REAR BUMPER CLIP (SN)	REPLACED	45.00	45.00
1	SET REAR REVERSE SENSOR (SN)	REPLACED	280.00	220.00
1	REAR REVERSE CAMERA (SN)	REPLACED	480.00	350.00
1	REAR FLOOR PANEL INSULATOR (SN)	REPLACED	180.00	180.00
1	REAR FENDER QUARTER GLASS SEALANT (SN)	NOT NECESSARY	80.00	-
			1,205.00	895.00
	<b>LABOUR</b>			
	TO DISCONNECT AND RECONNECT, CHECK ELECTRICAL WIRING, HARNESS WIRES, SOCKETS, REPLACE DAMAGED PARTS.		50.00	30.00
	TO REMOVE AND REFIT INNER TRIMS, INNER GARNISHES, TO FACILITATE THE REPAIRS.		220.00	80.00
	TO REMOVE AND REFIT FUEL TANK SYSTEM.	NOT NECESSARY	110.00	-
	TO REMOVE AND REFIT REAR BUMPER SENSOR.		120.00	60.00
	TO REMOVE AND REFIT REAR WINDSCREEN GLASS.		180.00	120.00
	TO REMOVE AND REFIT QUARTER GLASS TO FACILITATE THE REPAIRS.	NOT NECESSARY	120.00	-
	TO REMOVE AND REFIT, STRAIGHTEN AND RE-ADJUST EXHAUST PIPE AND REPLACE REAR EXHAUST SILENCER AND MOUNTINGS.		150.00	80.00
	TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK-OUT, REALIGN AND REPAIR INCLUDING CUT AND WELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS.		1,800.00	1,300.00
	TO SPRAY PAINT ON THE REPLACED AND REPAIRED PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE.		1,800.00	1,200.00
	TO APPLY UNDERCOATING ON THE REPAIRED AND REPLACED PANELS FOR RUST PROTECTION.		250.00	100.00
			-	-
			-	-
			-	-
			4,800.00	2,970.00
	<b>GRAND TOTAL</b>		<b>17,985.26</b>	<b>12,391.73</b>

Report Ref No. CS/LAW17021382/M1tbs2



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			9,900.00
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Report Ref No. CS/LAW17021382/M1tbs2

MA CHIN FOOK

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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