

ASS. REC. BY:

REF: G / GAT 17022120 / Agbn2 Special Instruction:

Surveyor:

Adrian

ASSIGNMENT (Office)

From (Person): Sharon Ng of GAT Date/Time: 20-11-2017 258pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLS 1222 C Insured: SLM 2843L

at Workshop m/s MG Solution Tel: 6744 4165

of 23 Kaki Bukit Ave 4 #02-03B

Policy No: Claim No: SLM 2843L

Sum Insured: Excess:

Make of Veh: D.O.A. 17-11-2017
(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP' 21-11-2017 H.O.D. Endorsement:

Date/Time: 20-11-2017 5:27pm Person Contacted: Jack Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SLS 1222 C - X
	SLM 2843L - X
27/11/17 @ 3.30pm	Informed Sharon Ng, we are pending estimate from repairer.
12/01/18 @ 12.10pm	revised to Sharon Ng by email.
	US \$ 10800, 7 days (Red \$ 23,34.66, 68%.)

REF:

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 7 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: SLS1222C Yr Regn: 2017 August
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mercedes Benz GLC 250 1991
 Colour: White A/C: Insured / Std / NI / NA
 Sp Reading: 6390 T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: WDC2539462F.208157

Gen. Cond: Good / Fair / Poor / BurntSteering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/55R15R: 235/55R19

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU PIE / SUMI /
 TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 21/01/17Survey held at MG SolutionDes. 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
TP Great American

RECEIVED 12 JAN 2018

Date/Time, File Pass to?

12/1/2018 ☐ : Preli. Report
☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 7Resurvey No. of Trip: 1

Survey Fee:

Transportation:

1) \$ - RS \$

Phone:

Other:

TOTAL

Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Invs (\$)☐ Weekend (\$)Report Format: TPLump Sum / I.B. (\$) 10800

450



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/GAI17022120/Aqb

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 20-11-2017



Code : GAI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLM 2843L	Veh. Inspected	SLS 1222C
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	20/11/2017

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	17/11/2017	Inspection Date	21/11/2017
Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933		

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: SLM 2843L

Date: 12th January 2018

Our Ref: CS/GAI17022120/Aqb

The Motor Claims Department
Great American Insurance Company

Attn: Sharon

Dear Sirs/Mdm

PRELIMINARY ADVICE OF VEHICLE NO. SLS 1222C .

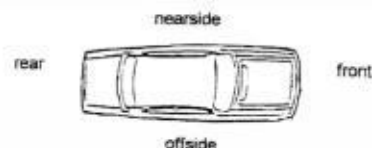
We thank you for the instruction on 20/11/2017.

Please be informed that we had conducted the inspection of the abovementioned vehicle on 21/11/2017 at the premises of M/s MG SOLUTION and have the following to report:-

Workshop Estimate Amount	: S\$ <u>33,934.66</u> .
Revised Estimate Amount	: S\$ <u>10,800.00 (Lump Sum)</u> .
"Check" Items Amount	: S\$ <u>-</u> .
Market Value	: S\$ <u>-</u> .
Salvage Value	: S\$ <u>-</u> .
Nett Value	: S\$ <u>-</u> .

Description of Damage:

The vehicle sustained damages at the o/s portion & undercarriage.



Comments/ Present Status:

Damages consistent.

We have NOT authorise repair.

Yours faithfully

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

Survey Department Check List (Case Handler)

Reference No.: Cy/611701120/12/18
Policy Type: OD / TP / TP RES / TL / EVA

SLS 12/18

Case Handler

Typist

Admin (Cathy): Case handler to make sure all information created by the assignment team are ACCURATE.

(1) Office Assign Form

- C Reference No.
- C Customer Code
- N Assign From
- C Assign Date
- C Veh No (Inspected)
- C Veh No (Insured)
- C D.O.A
- C Policy No
- C Claim No
- C Insurance Authorisation (CA /REV/REP)
- C Report Type
- C Weekend Charges
- N Survey held at/Repairer
- C Excess

Y-Date	N-Date	Y-Date	N-Date
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

Surveyor (Adrian): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form

- C Vehicle No
- C Regn Month/Year
- N Vehicle Type
- N Make & Model
- C Engine Capacity. (C.C)
- N Colour
- C Odometer. (Sp.Reading)
- C Chassis No
- N General Condition
- N Steering
- N Brake
- N Modification (Modi)
- C Tyre Size
- N Tyre Make
- C Tyre Balance
- C Date of Inspection
- N Survey held
- N Des.of Damages

✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

(2) System - (Views/Merimen)

- C Damaged Vehicle Photographs Uploaded

✓		
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(3) Workshop Estimate/Assignment Form

- N ALL Parts condition
- C Market Value for OD cases
- C Estimate Repair Cost for PRI (RSI, TMI, MSIG)
- C Days of repair
- C Finalised Amount
- C Re-inspection Cases to Finalize within 5 Days

✓		
✓		

(4) System - (Views/Merimen)

- C Resurvey photo Uploaded

✓		
---	--	--

Check By:

Case Handler

Date

Catherine Chong (LKK Auto)

From: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Sent: Monday, 20 November, 2017 2:58 PM
To: SUR
Cc: assignments
Subject: FW: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L
Attachments: SLS1222C-(Pre-Inspection).pdf

Importance: High

Dear LKK

Insured has not reported the accident. Kindly conduct TP pre-repair inspection first.

Regards
Sharon Ng
Great American

From: MG Solution Pte Ltd [mailto:mg3solution@gmail.com]
Sent: Monday, November 20, 2017 9:08 AM
To: General Claims <GeneralClaims@sg.gaig.com>
Cc: Ng, Sharon <Sharon.Ng@sg.gaig.com>
Subject: SLS1222C (Pre-inspection)-DOA : 17/11/2017
Importance: High

Dear person in charge,

Please refer to attach file and arrange for pre-inspection.

we prefer our single joint expert as below:

ADRIAN LING WAI PING	LKK AUTO CONSULTANTS PTE LTD
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Best Regards,
Heng Yoke Hong(Ms)

MG SOLUTION PTE LTD
23 Kaki Bukit Avenue 4(South Wing)
#02-03B Vicom Inspection Centre
Singapore 415933
Tel : 6744 4165
Fax : 6744 4604
Co. Reg. No. 201427944N



This email has been checked for viruses by Avast antivirus software.
www.avast.com

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Friday, 12 January, 2018 12:10 PM
To: 'Ng, Sharon'; SUR
Cc: assignments
Subject: RE: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L
Attachments: CSGAI17022120Aqb.pdf

Dear Sharon,

Enclosed herewith preliminary advice of SLS 1222C.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Shiau Chan (LKKAUTO)
Sent: Wednesday, 22 November, 2017 3:30 PM
To: 'Ng, Sharon' <Sharon.Ng@sg.gaig.com>; SUR <sur@lkkauto.com>
Cc: assignments <assignments@lkkauto.com>
Subject: RE: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L

Dear Sharon,

Please be informed that we have inspected the vehicle SLS 1222C on 21/11/2017.

We are pending for estimate from repairer.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Monday, 20 November, 2017 5:28 PM
To: 'Ng, Sharon' <Sharon.Ng@sg.gaig.com>; SUR <sur@lkkauto.com>
Cc: assignments <assignments@lkkauto.com>
Subject: RE: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L

Dear Sharon,

Thank you for the assignment.

Best Regards,

Shiau Chan (LKKAUTO)

From: Shiau Chan (LKKAUTO)
Sent: Wednesday, 22 November, 2017 3:30 PM
To: 'Ng, Sharon'; SUR
Cc: assignments
Subject: RE: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L

Dear Sharon,

Please be informed that we have inspected the vehicle SLS 1222C on 21/11/2017.

We are pending for estimate from repairer.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

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

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

From: Admin-D (LKKAUTO)
Sent: Monday, 20 November, 2017 5:28 PM
To: 'Ng, Sharon' <Sharon.Ng@sg.gaig.com>; SUR <sur@lkkauto.com>
Cc: assignments <assignments@lkkauto.com>
Subject: RE: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L

Dear Sharon,

Thank you for the assignment.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | 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: Monday, 20 November, 2017 2:58 PM
To: SUR <sur@lkkauto.com>
Cc: assignments <assignments@lkkauto.com>
Subject: FW: SLS1222C (Pre-inspection)-DOA : 17/11/2017 against Insd-SLM2843L
Importance: High

Dear LKK

Insured has not reported the accident. Kindly conduct TP pre-repair inspection first.

Regards

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	17/11/2017 16:46
Date Of Accident	17/11/2017 10:35
Exact Location Of Accident	SIMS AVE EAST AND JUNCTION OF CHANGI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS1222C
Insured/Policyholder	
Name Of Registered Owner	ONG HO YONG ADAM
NRIC No	S7048583D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98231030
Alternative Phone No	OFFICE-88888888

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLA250-2.0 4MATIC (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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092909991
Cover Note Number	

Driver

Name of Driver	DADINA WONG MEE CHING
NRIC No	S7640543C
Date Of Birth	22/12/1976
Occupation	INDOOR
Date Of Driving Pass	13/11/1995
Driving Experience	22 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98537204
Fax Number	
Contact Number	
Email Address	DADNIAWONG@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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. 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

ON 17/11/2017 AT ABOUT 1038HRS AT ALONG SIMS AVE EAST AND EXIT OF CHANGI ROAD. I WAS TRAVELLING ON THE EXTREME RIGHT LANE AND WHEN COMING TOWARDS THE ABOVE MENTIONED EXIT, A VEHICLE (B) EXITED OUT WITHOUT PROPER LOOKOUT AND WITHOUT STOPPING FOR MY ON COMING TRAFFIC AND HENCE COLLIDED ONTO MY RIGHT REAR PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE. I HAVE ONE PASSENGER INSIDE MY VEHICLE. (A) SLS 1222C (B) SLM 2843K

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: PLEASE ASK FROM WORKSHOP

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLM2843L

Vehicle Make/Model/Colour TOYOTA ALTIS

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

SKETCH PLAN

IMPORTANT NOTICE

1. Please provide correctly the data and 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 reassess 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 request to any 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 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 data collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms may be permitted to collect, use, disclose and/or process my Personal Information for the purpose(s) stated in (a) above.
- (c) my Personal Information may/are disclosed to any of the Insurers and/or disclosed to third parties for a purpose(s) other than that stated in (a) above.
- (d) the General Insurance Association of Singapore may collect and disclose my Personal Information for the purpose(s) stated in (a) above.
- (e) the GIA Records Management Centre may collect and disclose my Personal Information for the purpose(s) stated in (a) above.
- (f) I shall indemnify and/or compensate any third party in and arising, connected with, or resulting or managing from, regulations, law enforcement and government agencies as reasonably required for the purposes stated in (a) above.
- (g) for complying with requirements under any regulatory laws or court orders.

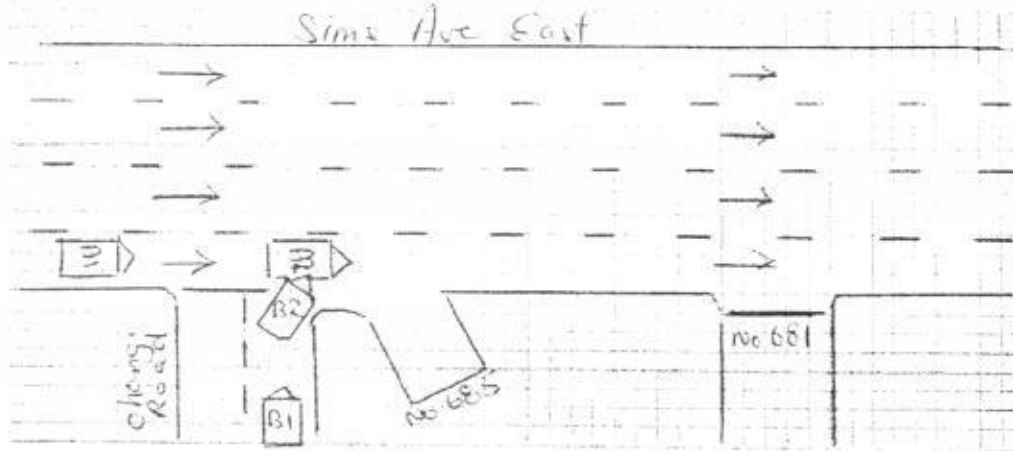
Policyholder's Signature
Date & Time:

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

Supporting Centre Personnel's Signature
Name:
NIC/PIN No:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/11/2017 at about 1030 hrs at along Sims Ave East and exit of Cheng Road. I was travelling on the extreme Right Lane and when coming towards the above mentioned exit, a vehicle (B) exited out without proper lookout and without stopping for my on coming traffic and hence collided onto my Right Rear Portion of my vehicle (A) causing damages to my vehicle. I have one passenger inside my vehicle.

(A) SLS 1222 C

(B) SHM 2843 K

DECLARATION

I/We declare the foregoing contents are true and correct.

Police Officer's Signature
Date & Time:

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

Reporting Officer/Personnel's Signature
Name:
Cell/Station:

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Reg. No: 201427944N

Email: mg3solution@gmail.com

TO : GREAT AMERICA INSURANCE COMPANY DATE : 20/11/2017
ATTENTION : MOTOR CLAIMS DEPT JOB TYPE : T/P CLAIM
ESTIMATE REPORT :

VEHICLE DETAILS

VEHICLE NO : SLS1222C

MODEL : MERCEDES BENZ GLC250

CHASSIS NO

ACCIDENT DETAILS DATE : 17-Nov-17
TIME : 10:35HRS

THIRD PARTY REQUESTOR / CONTACT : JACK

CLAIM DETAIL : PARTS

S/N	DESCRIPTION	QTY	UNIT LIST PRICE	TOTAL LIST PRICE
1	REAR DOOR RH <i>Dented.</i>	1	\$ 2,855.30	\$ 2,855.30
2	REAR SIDE SKIRT RH <i>lt</i>	1	\$ 890.30	\$ 890.30
3	REAR FENDER RH <i>Repair</i>	1	\$ 2,933.20	\$ 2,933.20
4	REAR FENDER INNER COWLING RH <i>NE New</i>	1	\$ 289.20	\$ 289.20
5	REAR FENDER WHEEL ARCH RH <i>lt</i>	1	\$ 310.00	\$ 310.00
6	REAR BUMPER <i>tom</i>	1	\$ 1,955.30	\$ 1,955.30
7	REAR BUMPER SIDE RETAINER <i>new</i>	1	\$ 103.20	\$ 103.20
8	REAR BUMPER LOWER LID <i>tom</i>	1	\$ 688.20	\$ 688.20
9	REAR FLOOR PANEL <i>Repair</i>	1	\$ 3,200.00	\$ 3,200.00
10	REAR EXHAUSE PIPE INSULATOR <i>2 of new</i>	1	\$ 255.90	\$ 255.90
11	REVERSE SENSOR	6	\$ 211.00	\$ 1,266.00
12	REVERSE SENSOR WIRE HARNESS <i>NE New</i>	1	\$ 322.60	\$ 322.60
13	REAR CROSS MEMBER <i>NE New</i>	1	\$ 1,544.20	\$ 1,544.20
14	REAR SHOCK ABSORBER <i>Best</i>	1	\$ 811.20	\$ 811.20
15	REAR UPPER ARM <i>Best</i>	1	\$ 355.00	\$ 355.00
16	REAR UPPER TRADING ARM <i>Best</i>	1	\$ 288.70	\$ 288.70
17	REAR LOWER ARM <i>Best</i>	1	\$ 388.70	\$ 388.70

2650.

1655.30

18	REAR LOWER TRADING ARM <i>Best</i>	1	\$ 250.00	\$ 250.00	-
19	REAR CONTROL ARM <i>Best</i>	1	\$ 380.00	\$ 380.00	-
20	REAR KNUCKLE ARM <i>Best</i>	1	\$ 1,922.00	\$ <u>1,922.00</u>	1650.
21	REAR HUB BEARING <i>Heater. He</i>	1	\$ 399.20	\$ 399.20	-
22	REAR DRIVE SHAFT <i>2HP</i>	1	\$ 2,680.30	\$ 2,680.30	X
23	REAR BRAKE PIPE <i>He</i>	1	\$ 488.90	\$ 488.90	X.

TOTAL PRICE \$ 24,577.40

LESS 10% \$ 2,457.74

SUB TOTAL PRICE \$ 22,119.66

SPECIAL NETT ITEMS

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT	
1	REAR BUMPER CLIPS(SET) <i>Nec</i>	1	\$ 25.00	\$ 25.00	-
2	REAR FENDER INNER COWING CLIPS(SET) <i>Nec</i>	1	\$ 25.00	\$ 25.00	-
3	REAR FLOOR PANEL INSULATION SEAL <i>He</i>	1	\$ 150.00	\$ 150.00	X
4	WHEEL RIM <i>At</i>	1	\$ 3,200.00	\$ 3,200.00	1050
5	WHEEL TYRE <i>Punctured</i>	1	\$ 1,800.00	\$ 1,800.00	380.

TOTAL \$ 5,175.00

CLAIM DETAILS: LABOUR AND SPRAY PAINTING (REAR)

1	TO PANEL BEAT, WELD, CUT, KNOCK STRAIGHTEN, ADJUST GRAZE, JOIN	\$ 1,400.00	600	
2	TO PUTTY, SPRAY PAINT, POLISH, WAX AFFECTED PARTS AND PANELS	\$ 1,600.00	600	
3	TUFF COAT	\$ 250.00	60	
4	WIRING CHECK	\$ 120.00	30	
5	CONDUCT WATER LEAKAGE TEST	\$ 80.00	X	
6	REMOVE AND REFIX CUSHION SEAT/ UPHOLSTRY AND ROOF LINING TO FACILITATE REPAIR	\$ 250.00	60	
7	TO CHECK DIAGNOSTICS OF VEHICLE MANAGEMENT/CONTROL UNITS, RESET MEMORIES TO <i>speci cation Etc</i>	\$ 180.00	100.	
8	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING	\$ 80.00	60.	
9	TO RESET REVERSE SENSOR WIRE HARNESS	\$ 280.00	X.	
10	TO REMOVE AND REFIX REAR EXHAUSE PIPE	\$ 350.00	X	
11	REMOVE AND REFIX REAR UNDERCARRIAGE	\$ 450.00	250.	

12	FOUR WHEEL ALIGNMENT	\$	100.00	80.	
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TOTAL

\$5,140.00

1840

ESTIMATE REPORT

TOTAL PARTS COST : \$ 27,294.66

TOTAL LABOUR COS : \$ 5,140.00

TOTAL REPAIR COS : \$ 32,434.66

APPROVED DETAILS

SURVEYOR :

CONTACT NO :

PART BY PART / LUMP SUM :

NO OF DAYS

FAX

Supplementary: 500

total: 13557.82

h/c: 10.8K ✓

07 Days.

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:

9237.84

5130

1840

13267.84

2741.568

10966.27

33959.66

MG SOLUTION PTE LTD

23 Kaki Bukit Avenue 4 (South Wing) #02-03 Singapore 415933

Tel: (+65) 6243 1373 | Fax: (+65) 6243 1376

Reg. No: 201427944N

Email: mg3solution@gmail.com

TO : GREAT AMERICA INSURANCE COMPANY DATE : 20/11/2017

ATTENTION : MOTOR CLAIMS DEPT JOB TYPE : T/P CLAIM

ESTIMATE REPORT :

VEHICLE DETAILS

VEHICLE NO : SLS1222C

MODEL : MERCEDES BENZ GLC250

CHASSIS NO

ACCIDENT DETAILS DATE : 17-Nov-17
TIME : 10:35HRS

THIRD PARTY REQUESTOR / CONTACT : JACK

SPECIAL NETT ITEMS

S/N	DESCRIPTION	QTY	UNIT S/NETT	TOTAL S/NETT
1	CERAMIC COATING	1	\$ 1,500.00	\$ 1,500.00

TOTAL \$ 1,500.00

ESTIMATE REPORT

TOTAL PARTS COST : \$ 1,500.00

TOTAL LABOUR COS : \$ -

TOTAL REPAIR COS : \$ 1,500.00

APPROVED DETAILS

SURVEYOR :

CONTACT NO :

FAX :

PART BY PART / LUMP SUM :

NO OF 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

GREAT AMERICAN INSURANCE COMPANY

Ref : CS/GAI17022120/Aqbn2

3 TEMASEK AVENUE
#16-01 CENTENNIAL TOWER
SINGAPORE 039190

Date : 17-01-2018



Code : GAI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLM 2843L	Veh. Inspected	SLS 1222C
Policy No.		Coverage (\$)	0.00
Claim No.	SLM2843L	Excess (\$)	0.00
Assign From	SHARON NG	Assign Date	20/11/2017

2. Vehicle Particulars & Condition

Make & Model	MERCEDES BENZ GLC250	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	WDC2539462F209157	Colour	WHITE
Odometer	6390	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	235/55 R19	PIRELLI	6 mm
L/H Front Tyre	235/55 R19	PIRELLI	6 mm
R/H Rear Tyre	235/55 R19	PIRELLI	6 mm
L/H Rear Tyre	235/55 R19	PIRELLI	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY AND UNDERCARRIAGE. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	17/11/2017	Inspection Date	21/11/2017
Survey held at	MG SOLUTION PTE LTD 23 KAKI BUKIT AVE 4 (SOUTH WING) #02-03B VICOM INSPECTION CENTRE, SINGAPORE 415933		

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:	7 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLS 1222C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR DOOR RH	DENTED	2,855.30	2,650.00
1	REAR SIDE SKIRT RH	CUT	890.30	890.30
1	REAR FENDER RH	TO REPAIR SEE LABOUR	2,933.20	-
1	REAR FENDER INNER COWLING RH	NOT NECESSARY	289.20	-
1	REAR FENDER WHEEL ARCH RH	CUT	310.00	310.00
1	REAR BUMPER	TORN	1,955.30	1,655.30
1	REAR BUMPER SIDE RETAINER	NECESSARY	103.20	103.20
1	REAR BUMPER LOWER LID	TORN	688.20	688.20
1	REAR FLOOR PANEL	TO REPAIR SEE LABOUR	3,200.00	-
1	REAR EXHAUST PIPE INSULATOR	NOT NECESSARY	255.90	-
6	REVERSE SENSOR @\$211.00	NOT NECESSARY	1,266.00	-
1	REVERSE SENSOR WIRE HARNESS	NOT NECESSARY	322.60	-
1	REAR CROSS MEMBER	NOT NECESSARY	1,544.20	-
1	REAR SHOCK ABSORBER	BENT	811.20	811.20
1	REAR UPPER ARM	BENT	355.00	355.00
1	REAR UPPER TRADING ARM	BENT	288.70	288.70
1	REAR LOWER ARM	BENT	388.70	388.70
1	REAR LOWER TRADING ARM	BENT	250.00	250.00
1	REAR CONTROL ARM	BENT	380.00	380.00
1	REAR KNUCKLE ARM	BENT	1,922.00	1,650.00
1	REAR HUB BEARING	NECESSARY	399.20	399.20
1	REAR DRIVE SHAFT	NOT NECESSARY	2,680.30	-
1	REAR BRAKE PIPE	NOT NECESSARY	488.90	-
	LESS 10% DISCOUNT		-2,457.74	-1,081.98
			22,119.66	9,737.82
<u>SPECIAL NETT ITEMS</u>				
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	25.00	25.00
1	SET REAR FENDER INNER COWLING CLIPS (SN)	NECESSARY	25.00	25.00
1	REAR FLOOR PANEL INSULATION SEAL (SN)	NOT NECESSARY	150.00	-
1	WHEEL RIM (SN)	CUT	3,200.00	1,050.00
1	WHEEL TYRE (SN)	PUNCTURE	1,800.00	380.00
			5,200.00	1,480.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	TO PANEL BEAT,WELD,CUT,KNOCK STRAIGHTEN,ADJUST GRAZE,JOIN.INCLUSIVE OF THE REPAIR OF REAR FENDER RH AND REAR FLOOR PANEL.		1,400.00	600.00
	TO PUTTY,SPRAY PAINT,POLISH,WAX AFFECTED PARTS AND PANELS.		1,600.00	600.00
	TUFF COAT.		250.00	60.00
	WIRING CHECK.		120.00	30.00
	CONDUCT WATER LEAKAGE TEST.	NOT NECESSARY	80.00	-
	REMOVE AND REFIX CUSHION SEAT/UPHOLSTRY AND ROOF LINNING TO FACILITATE REPAIR.		250.00	60.00
	TO CHECK DIAGNOSTICS OF VEHICLE MANAGEMENT/CONTROL UNITS,RESET MEMORIES TO SPECIFICATION ETC.		180.00	100.00
	REMOVE AND REFIX REVERSE SENSOR AND DISTANCE SETTING.		80.00	60.00
	TO RESET REVERSE SENSOR WIRE HARNESS.	NOT NECESSARY	280.00	-
	TO REMOVE AND REFIX REAR EXHAUST PIPE.	NOT NECESSARY	350.00	-
	REMOVE AND REFIX REAR UNDERCARRIAGE.		450.00	250.00
	FOUR WHEEL ALIGNMENT.		100.00	80.00
	CERAMIC COATING (ADDITIONAL).		1,500.00	500.00
			6,640.00	2,340.00
	GRAND TOTAL		33,959.66	13,557.82
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			10,800.00

Report Ref No. CS/GAI17022120/Aqbn2

ADRIAN LING WAI PING

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

Licensed Appraiser

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