

Surveyor:

KSC

DOI:

ASSIGNMENT

21/1/17

Date / Time:

21/1/17

Registered in Merimen:

22/1/17

Pre-assign / CCU / FTE



Insured Vehicle No.:

SH9794R

Name of Insured:

CTP

Insured Tel No.:

HP:

Excess Sec II :S\$

D.O.A.:

19/1/17

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Ng Lian Hui

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

Kramat Rd & Koek Rd

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No

SHB 99810



INSRS:

WSP:

Tel:

Liability:

RMKS:

Trans. Cab



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time	STAGE	DATE / PIC
23-1-18	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	NA
	After call ltr to OI:	
	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup):	X
	After call ltr to OI:	X
	Authorisation To Act:	X
	Release Voucher:	X
	Final Repair Bill:	X
	Car Rental Invoice:	X
	Towing Invoice:	X
	LTA / GIA:	X
	Medical Bill:	X
	PIR:	X
	Mandate/Reject Instruction:	X
	LOD:	X
	Payment Breakdown Form:	
	Post-Repair Photos:	
	Others:	

PRELIMINARY ADVICE		Date/Time:	Sent By:
FINALIZATION		Date/Time:	Confirm with:
Repair Cost:	S\$	(days) Reduction:	%
FINAL SETTLEMENT		Date/Time:	Confirm with:
Final Liability:	%	(Agreed / Assessed) BOLA S/N No.:	IS
Repair Cost:	S\$	2,514.50	
Loss of Rental (LOR):	S\$	297.96	(3 days) X 99.32
Loss of Use (LOU):	S\$	120	(5 days) X 40
Loss of Income (LOI):	S\$	120	(5 days) X 40
LOR only	<input type="checkbox"/>	LOU only	<input type="checkbox"/>
LOR + LOU	<input type="checkbox"/>	LOR + LOI	<input type="checkbox"/>
(Tick only one)			
GIA/LTA Search	S\$		
Medical:	S\$		
Disbursement:	S\$		
Legal Cost:	S\$		
Total:	S\$	2,932.46	Global Sum S\$:
FINAL PAYMENT		Date/Time:	Confirm with:
Payee 1:	S\$	2,932.46	Name 1: TRANS-CAB SERVICES PTE LTD
Payee 2: (if applicable)	S\$		Name 2: X
Payee 3: (if applicable)	S\$		Name 3: X

ASS. REC. BY:

REF: TH /Kennerth**ASSIGNMENT**

From: _____ Date: _____

Estimated Cost: _____

QD / 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.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 311B 99810Yr Regn: 09, 13

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

Truck / Trailer or _____

Make: Perant Carinac.c. 1995Colour: M. White IR

A/C: Insured / Std / NI / NA

Sp. Reading: 700372

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VFIABL 15MC273530Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim orTyre Size: F: Gr7215/60R16R: Long Long

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

TOYO / YOKO or _____

Front

Rear

R/Bal. 9

mm

R/Bal. 8

mm

L/Bal. 9

mm

L/Bal. 8

mm

D.O.A. 19/11/17D.O.I. 21/11/17

Survey held at _____

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

N/S Frt

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

Date / Time Action / Instruction

22/11/17 File pass to Corkum5/14 L1 Log 8 235d Confirm Termin (2+1 x 99.32 + 120)R (\$20,655.22 / 8497)

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee: _____

Transportation: _____

Photos _____

Others _____

TOTAL

Report Format: _____

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

**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				
INDIA INTERNATIONAL INSURANCE PL		Ref : CC3/III17022292/Kza3		
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711		Date : 22-11-2017		
		Code : III2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SH 9794R	Veh. Inspected	SHB 9981D	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	22/11/2017	
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	19/11/2017	Inspection Date	21/11/2017	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

TRANS-CAB AUTO SERVICES PTE LTD

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHB 9981D - III**AAD1711-203***Not Authored*
1/1/2017

Vehicle No.:
Chassis No.:
Vehicle Make:
Vehicle Model:
Date of Accident :
Third Party Insurer :

SHB9981D - CANDY
VF1ABL15AUC273530
RENAULT
LATITUDE
19.11.2017
III

PART			LIST	
1	1	BUMPER COVER FRT	\$	<i>Bu/Re</i> 1,259.42 ✓
2	1	BUMPER SPOILER FRT	\$	<i>Sm</i> 181.75 X
3	1	BUMPER FOG LAMP GRILLE LH	\$	<i>Sm</i> 207.22 X
4	1	BUMPER RETAINER FRT LH	\$	<i>Re</i> 151.41 ✓
5	1	BUMPER RETAINER FRT RH	\$	<i>Sm</i> 151.41 X
6	1	BUMPER SUPPORT FRT LH	\$	<i>Sm</i> 123.88 X
7	1	BUMPER SUPPORT FRT RH	\$	<i>Sm</i> 123.88 X
8	1	BUMPER BEAM FRT	\$	<i>Re</i> 914.08
9	1	RADAIOR GRILLE	\$	<i>Sm</i> 1,707.78
10	1	RADAIOR GRILLE BADGE 'RENAULT'	\$	<i>Sm</i> 225.36
11	1	RADAIOR GRILLE FRAME	\$	<i>Sm</i> 1,353.75
12	1	AIR CLEANER LOWER	\$	<i>Sm</i> 352.64
13	1	AIR CLEANER HOSE	\$	<i>Sm</i> 76.14
14	1	BONNET	\$	<i>Re</i> 1,941.63
15	1	BONNET HINGE LH	\$	<i>Re</i> 348.31
16	1	BONNET STRUT LH	\$	<i>Sm</i> 88.61
17	1	HEADLAMP LH	\$	<i>Sm</i> 1,184.43
18	1	HEADLAMP PANEL FRT LH	\$	<i>Re</i> 152.15
19	1	FENDER PANEL FRT LH	\$	<i>Bu</i> 783.83 ✓
20	1	FENDER INSULATOR LH	\$	<i>Sm</i> 130.84
21	1	WHEELARCH FRT LH	\$	<i>Sm</i> 278.84
22	1	DOOR MIRROR LH	\$	<i>Sm</i> 1,483.40
23	1	DOOR MIRROR GLASS LH	\$	<i>Sm</i> 148.20
24	1	DOOR MIRROR BACK COVER LH	\$	<i>Sm</i> 218.46
25	1	DOOR PANEL FRT LH	\$	<i>Re</i> 2,844.66
26	1	DOOR HINGE UPPER LH	\$	<i>Re</i> 274.50
27	1	DOOR HINGE LOWER LH	\$	<i>Re</i> 300.55

TOTAL	\$	17,007.13
10%	\$	1,700.71
	\$	15,306.42

Special Nett

TRANS-CAB AUTO SERVICES PTE LTD**AAD1711-203**

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHB 9981D - III

1	1SET	FRONT BUMPER CLIP	\$	<i>nn</i>	66.00	✓
2	1SET	WHEELARCH CLIP LH	\$	<i>nn</i>	66.00	X
3	1	TOW COVER FRT	\$	<i>nn</i>	14.50	X
4	1	CAP HUB LH FRT	\$	<i>nn</i>	35.00	X
5	1	RIM LH FRT	\$	<i>nn</i>	385.00	X
6	1	TYRE LH FRT	\$	<i>nn</i>	330.00	X
7	1SET	BUMPER SUPPORT FRT CLIP LH	\$	<i>nn</i>	9.80	X
8	1SET	BUMPER RETAINER FRT CLIP LH	\$	<i>nn</i>	12.50	X
9	1	DOOR STICKER "Trans-cab"	\$	<i>nn</i>	80.00	X
10	1	DOOR STICKER "Classic"	\$	<i>nn</i>	30.00	X

TOTAL	\$	1,028.80
TOTAL PARTS	\$	16,335.22

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same

\$ 2,800.00 *40%*

To Check Electrical Lighting Concerned.

\$ 170.00 *15%*

Putty and spray painting of the affected portion.

\$ 3,000.00 *44%*

To check steering geometry and computer wheel alignment

\$ *nn* 220.00 X

To transfer of tire, rim and on wheel balancing.

\$ *nn* 170.00 X

To rust-proofing of the affected areas.

\$ 170.00 *30%*

To Transfer Of Fender Fittings, Attachments And Perform Water Seepage Test.

\$ *nn* 170.00 X

TOTAL	\$	6,700.00
Over All Total	\$	23,035.22

(PARTS BY PARTS) 10 Repair Days

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

10 Days*2 days*

Print Received Message

This mail is associated with :

***SHB9981D (MCT17110657)**

[SH9794R]

TP

TRANS-CAB SERVICES PTE LTD

Nov 19 2017 2:00AM

[COMFORT TRANSPORTATION PTE LTD]

Trans-cab Auto Services Pte Ltd

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 03/05/2018 16:47 PM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$2932.46) - SHB9981D - Claim Handler: NATALIE LEE

Approved:2932.46.



Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1711-203

Your Ref : SH9794R

Date : 09.April 2018

INDIA INT'L INS PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHB9981D AND SH9794R ON 19/11/17 02:30 AM ALONG KRAMAT ROAD

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	2,514.50
2.	Loss of Rental for <u>3</u> days @ \$ <u>99.31</u> per day	\$	297.96
3.	Loss of Income for <u>3</u> days @ \$ <u>40</u> per day	\$	120.00
4.	LTA Search Fee	\$	0.00
5.	Survey Fee	\$	0.00
	Total	\$	2,932.46

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHB9981D and SH9794R along KRAMAT ROAD on 19/11/17 02:30 AM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 9 (day) of April 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

EXPRESS SETTLEMENT

DISCHARGE VOUCHER

III-Direct Settlement (PODS)

India Ref: MCT17110657
Claimant Ref: AAD1711-203

We/I, TRANS-CAB SERVICES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 2,514.50 (repair cost), S\$ 417.96 (loss of use/rental), S\$ — (search fee), vehicle no. SHB 9981P that was damaged pursuant to the accident which occurred on 19.11.17 (date) at KRAMAT ROAD (location) involving vehicle no. SH 9794R (insured vehicle). This is pursuant to the inspection conducted on 21.11.17 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner TRANS-CAB SERVICES PTE LTD ("the third party claimant") of vehicle no. SHB 9981P to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHB 9981P (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 2,932.46 to TRANS-CAB AUTO SERVICES PTE LTD

Dated this 9 day of 5 20 18

CLAIMANT:

Signature: Signed by "the workshop" (with chop)
Name: JASMINE TAN SIEW KIM
NRIC: S74056361
Address: TRANS-CAB AUTO SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63 S'pore 569111
Nationality: SINGAPOREAN
Occupation: GM

WITNESS:

Signature: Signed by appointed Surveyor
Name: LKK Auto Consultants Pte Ltd
NRIC: 199607198R
Address: Blk 51, Paya Ubi Industrial Park,
Ubi Avenue 1, #02-25 | S(408933)
Nationality: -
Occupation: -

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666**Fax:** 6287 7764**Co. Reg. No.:** 201019626G**GST Reg. No.:** 201019626G**Tax Invoice / Debit Note**

TO: INDIA INTERNATIONAL INSURANCE PTE LTD 64 CECIL STREET #05-00 IOB BUILDING 049711 Singapore ATTENTION:	INVOICE NO. : INV1712-256 DATE : 29. December 2017 REFERENCE NO : AAD1711-203 TERMS : DUE DATE : 29. December 2017 PAGE : 1
--	--

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHB9981D;DOA 19.11.17(LUMP SUM-17)	1	2,514.50	2,514.50

Total SGD Excl. GST :	2,350.00
7% GST :	164.50
Total SGD Incl. GST :	2,514.50

****** TWO THOUSAND FIVE HUNDRED FOURTEEN AND FIFTY SGD ONLY ******

- 1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"
- 2) Please quote our Invoice Number during payment.
- 3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
- 4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

09 April, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 19/11/17 02:30 AM at KRAMAT ROAD

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHB9981D. The taxi was hired to YONG YOOK PIN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$99.32 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

19-11-2017

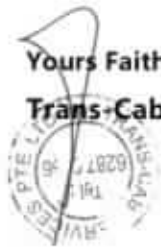
Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD1711-203	Accident Date 19-11-2017
19/11/2017 05:30	22/11/2017 18:00	SHB9981D

Yours Faithfully,

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

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

Direct Settlement

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 Nov 2017 Edit Reg		21 Nov 2017 00:00 Edit Adj Rpt	\$2,350.00 Edit Estimates	\$2,350.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R								
Main Claimant:	TRANS-CAB SERVICES PTE LTD , Co. Reg. No.: 200303878K								
Vehicle Reg. No.:	SHB9981D	Date of Loss:	19/11/2017 02:00 - :59 [49 Months and 20 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MCT17110657	Policy/Cover Note No.:	MCOM0015						
Vehicle Reg. No. (Insured):	SH9794R	Policy No. (Claimant):	VPX/P1680520						
		Excess:							
Repairer:	Trans-cab Auto Services Pte Ltd () No 2 Ang Mo Kio Street 63, 569111 Ang Mo Kio - Tel:								
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by NATALIE LEE - 63476100 ext 243]								
Claimant's Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 01/12/2017]								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> III_SG (03/05/2018): Alert - Adj Mandate Approved (\$2932.46) - SHB9981D - Claim Handler: NATALIE LEE III_SG (24/01/2018): Alert - Adj Mandate Approved (\$0.00) - SHB9981D - Claim Handler: NATALIE LEE 									
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.									

Claim Documents

*SHB9981D (MCT17110657)
[SH9794R]
TP
TRANS-CAB SERVICES PTE LTD
Nov 19 2017 2:00AM
[COMFORT TRANSPORTATION PTE LTD]
Trans-cab Auto Services Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
2	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
3	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
4	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
5	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
6	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
7	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
8	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
9	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
10	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
11	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
12	02/05/18 12:07	General View	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	24/11/17 15:51	TP ESTIMATE - MARKED	Load PDF	
2	24/11/17 15:51	TP GIA REPORT	Load PDF	
3	16/05/18 14:21	WORKSHOP INVOICE	Load PDF	
4	16/05/18 14:21	AUTHORISATION TO ACT FORM	Load PDF	
5	16/05/18 14:21	Release Voucher	Load PDF	
6	16/05/18 14:21	RENTAL RECEIPT	Load PDF	
7	16/05/18 14:21	LOD	Load PDF	
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	23/11/17 08:34	Singapore Accident Statement	Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

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: CC3/III17022292/KJA3Q2

Date: 16/05/2018

REFERENCE

Handling Insurer: India International Insurance Pte Ltd Policy No: MCOM0015
 Claimant Vehicle No: SHB9981D Insured Vehicle No: SH9794R
 Date of Loss: 19/11/2017 Nature of Claim: TP Claim No: MCT17110657

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHB9981D
 Make & Model: RENAULT LATITUDE, 2.0 DCI AUTO D/AB 4DR (A) Engine No: M9R8839C000498
 Reg. Date: 30/09/2013 (Man. Year: 2013) Chassis No: VF1ABL15AUC273530
 Colour: Metallic White/Red Odometer: 700372 km
 Engine Capacity: 1995 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: Yes

CONDITION OF TYRES

Front Tyre Size: 215/60 R16 Rear Tyre Size: 215/60 R16
 Front Left Side: Giti 9 mm Rear Left Side: Linglong 8 mm
 Front Right Side: Giti 9 mm Rear Right Side: Linglong 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	16,335.22	2,041.19	14,294.03	87.50
Miscellaneous Items	0.00	0.00	0.00	
Labour	6,700.00	885.00	5,815.00	86.79
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	23,035.22	2,926.19	20,109.03	87.30
Approved Total (Overridden) (S\$)		2,350.00		
(S\$)	23,035.22	2,350.00	20,685.22	89.80
+ GST 7.00/7.00% (S\$)	1,612.47	164.50	1,447.97	89.80
Nett Amount (S\$)	24,647.69	2,514.50	22,133.19	89.80
+ Loss of Use (3.0 x S\$40.00/day) (S\$)		120.00		
+ Car Rental (3.0 x S\$99.32/day) (S\$)		297.96		
Nett Liability (S\$)		2,932.46		

INSPECTION

Date of Assignment: 21/11/2017
 Date Inspected: 21/11/2017 Inspected At: Trans-cab Auto Services Pte Ltd
 No 2 Ang Mo Kio Street 63
 Singapore 569111

Estimated Period of Repair: 2.0 days

Adjuster: KENNETH KONG

Manager: Joy Irene Bascao

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: 20 Apr 2018)	
Parts: 143	RENAULT LATITUDE 2.0 DCI AUTO D/AB 4DR (A) (Catalogue:Merimen Singapore 1.0)	
Labour: Repairer's	(Price-denominated Standard List)	
Print Code:	(Unsubmitted, no print-code for SHB9981D)	
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		*BUMPER COVER FRT	Buckled /Dented	1,259.42 FL	*1,259.42 FL
2	1		*BUMPER SPOILER FRT	Serviceable	181.75 FL	*- FL
3	1		*BUMPER FOG LAMP GRILLE LH	Serviceable	207.22 FL	*- FL
4	1		*BUMPER RETAINER FRT LH	Distorted	151.41 FL	*151.41 FL
5	1		*BUMPER RETAINER FRT RH	Serviceable	151.41 FL	*- FL
6	1		*BUMPER SUPPORT FRT LH	Serviceable	123.88 FL	*- FL
7	1		*BUMPER SUPPORT FRT RH	Serviceable	123.88 FL	*- FL
8	1		*BUMPER BEAM FRT	Repair	914.08 FL	*- FL
9	1		*RADIATOR GRILLE	Serviceable	1,707.78 FL	*- FL
10	1		*RADIATOR GRILLE BADGE RENAULT	Not Necessary	225.36 FL	*- FL
11	1		*RADIATOR GRILLE FRAME	Serviceable	1,353.75 FL	*- FL
12	1		*AIR CLEANER LOWER	Serviceable	352.64 FL	*- FL
13	1		*AIR CLEANER HOSE	Serviceable	76.14 FL	*- FL
14	1		*BONNET	Repair	1,941.63 FL	*- FL
15	1		*BONNET HINGE LH	Repair	348.31 FL	*- FL
16	1		*BONNET STRUT LH	Serviceable	88.61 FL	*- FL
17	1		*HEADLAMP LH	Serviceable	1,184.43 FL	*- FL
18	1		*HEADLAMP PANEL FRT LH	Repair	152.15 FL	*- FL
19	1		*FENDER PANEL FRT LH	Buckled	783.83 FL	*783.83 FL
20	1		*FENDER INSULATOR LH	Serviceable	130.84 FL	*- FL
21	1		*WHEELARCH FRT LH	Serviceable	278.84 FL	*- FL
22	1		*DOOR MIRROR LH	Serviceable	1,483.40 FL	*- FL
23	1		*DOOR MIRROR GLASS LH	Serviceable	148.20 FL	*- FL
24	1		*DOOR MIRROR BACK COVER LH	Serviceable	218.46 FL	*- FL
25	1		*DOOR PANEL FRT LH	Repair	2,844.66 FL	*- FL
26	1		*DOOR HINGE UPPER LH	Repair	274.50 FL	*- FL
27	1		*DOOR HINGE LOWER LH	Repair	300.55 FL	*- FL
28	1		*SET FRONT BUMPER CLIP	Necessary	66.00 FS	*66.00 FS
29	1		*SET WHEELARCH CLIP LH	Not Necessary	66.00 FS	*- FS
30	1		*TOW COVER FRT	Not Necessary	14.50 FS	*- FS
31	1		*CAP HUB LH FRT	Serviceable	35.00 FS	*- FS
32	1		*RIM LH FRT	Serviceable	385.00 FS	*- FS
33	1		*TYRE LH FRT	Serviceable	330.00 FS	*- FS
34	1		*SET BUMPER SUPPORT FRT CLIP LH	Not Necessary	9.80 FS	*- FS
35	1		*SET BUMPER RETAINER FRT CLIP LH	Not Necessary	12.50 FS	*- FS
36	1		*DOOR STICKER TRANS-CAB	Not Necessary	80.00 FS	*- FS
37	1		*DOOR STICKER CLASSIC	Not Necessary	30.00 FS	*- FS

F=Franchise part. S=SpcNett. L=List/ItemDisc.

Sub Total (\$\$) 18,035.93 2,260.66

- List Item Discount on L Items 10.00/10.00% (\$\$) 1,700.71 219.47

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No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
Total Parts (S\$)					16,335.22	2,041.19

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	PANEL BEATING ,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS ,ADJUST AND REALIGN THE SAME	New	2,800.00	400.00
2	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	15.00
3	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	3,000.00	440.00
4	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00
5	TO TRANSFER OF TIRE ,RIM AND ON WHEEL BALANCING	New	170.00	0.00
6	TO RUST -PROOFING OF THE AFFECTED AREAS	New	170.00	30.00
7	TO TRANSFER OF FENDER FITTINGS ,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST	New	170.00	0.00
Gross Labour Cost (\$\$)			6,700.00	885.00

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