

22/03/2002

ASS. REC. BY:

REF:

(S/C7170)2320/Ticket

Special Instruction:

Supervisor:

Tawfik

ASSIGNMENT (Office)

From (Person):

Zawyn Tay

of

C12

Date/Time:

22/11/2017 1238 pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJZ 1713 R

Insured:

YN 3103Y

at Workshop m/s

Wearnes

Tel:

9770 4368

of

249 Alexandra Rd

Policy No:

DMCVSN 15373 91702

Claim No:

SNM17 D06530C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

09/11/2017

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

H.O.D. Endorsement:

Date/Time:

22/11/2017 4:45 pm

Person Contacted:

Mandy

Vehicle IN / OUT

Date/Time

Action/Instruction

(✓)

Estimate

SJZ 1713 R

NBA / TML 13015513 / S

DOA: 200813

YN 3103Y - x

09/11/18@

11.31am confirmed with Mandy final fig \$3422.49, 2 days.  
CRed \$1763.61, 34%.

Signature

Tang

REF:

CT1

## 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: 2 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Mandy

Veh No:

SS21773R

Yr Regn:

210 OUT

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

Truck / Trailer or

Make:

Volvo S60

c.c

1994

Colour:

Brown

A/C:

Insured / Std / NI / NA

Sp. Reading

107962

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

GV1FS445B32004712

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:

235/45R17

R:

17

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

7/12/17

Survey held at

Wanman

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

RECEIVED

Date/Time File Pass to?

1) 09/11/17

Date/Time File Return to?

2)

☐

Preli. Report

☐

Final Report

Days Of Repair:

2

Resurvey No. of Trip:

1

Survey Fee:

Transportation

) \$ + RS. \$

) Photos

) Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

Weekend \$

Report Format:

MER-TP

Lump Sum / I.B.I. (\$

3422.49

220

220



# 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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CS/CT117022320/T1qb

3 ANSON ROAD #16-00  
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 22-11-2017



Code : CTI

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	YN 3103Y	Veh. Inspected	SJZ 1773R
Policy No.	DMCVSN1537791702	Coverage (\$)	0.00
Claim No.	SNM17D06530C02	Excess (\$)	0.00
Assign From	MERIMEN (JOWYN TAY)	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	09/11/2017	Inspection Date
Survey held at	WEARNES AUTOMOTIVE PTE LTD 249 ALEXANDRA ROAD SINGAPORE 159935	

## 5a. Remarks

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

Reference No. : 02CT117022320/746  
Policy Type: OD / TP / TP RES / TL / EVA

SJZ 1773R

**(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

[illegible]

### (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

[illegible]

### C Damaged Vehicle Photographs Uploaded

<input checked="" type="checkbox"/>			
-------------------------------------	--	--	--

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

✓	
✓	
✓	


C Resurvey photo/Uploaded

✓			
---	--	--	--

07/11/18

Date \_\_\_\_\_

21/05/2014

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

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 Nov 2017		22 Nov 2017 12:38 Assign				<b>New Assignment</b> Cancel Case

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b>		<b>[Created by insurer]</b>							
Insured:	ALLINTON ENGINEERING & TRADING PTE LTD, Co. Reg. No.: 198207163M								
Main Claimant:	WEARNES AUTOMOTIVE PTE LTD, Co. Reg. No.: 199501400R								
Vehicle Reg. No.:	SJZ1773R	Date of Loss:	09/11/2017 08:00 - :59						
Claim Type:	TP / SNM17D06530C02	Policy/Cover Note No.:	DMCVSN1537791702 (Comprehensive) Coverage: 03/09/2017 - 02/09/2018						
Vehicle Reg. No. (Insured):	YN3103Y	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	Wearnes Automotive Pte Ltd (Alexandra Road) 249 Alexandra Road, 159935 Alexandra - Tel: 63789370								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]								
Claimant's Insurer:	Liberty Insurance Pte Ltd (HQ) - Tel: 6221 8611								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 01/12/2017]								
Adj Asg. Remarks:	PLEASE PROCEED TO SURVEY AND ARRANGE FOR DIRECT SETTLEMENT.								
<b>ASSOCIATED MAIL RECEIVED</b>		View All Compose Case Mail							
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b>		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.									

## Shiau Chan (LKKAuto)

---

**From:** Shiau Chan (LKKAuto)  
**Sent:** Tuesday, 9 January, 2018 11:31 AM  
**To:** Mandy Neo; Admin-D (LKKAuto)  
**Cc:** SUR  
**Subject:** RE: SJZ1773R Finalizatinon

Dear Mandy,

Confirm final fig \$3,422.49 before GST and 2 repair days.

Best Regards,

**Shiau Chan (Ms)** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315

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

**From:** Mandy Neo [mailto:[mandy.neo@wearnes.com](mailto:mandy.neo@wearnes.com)]  
**Sent:** Tuesday, 9 January, 2018 11:14 AM  
**To:** Admin-D (LKKAuto) <[admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)>  
**Cc:** SUR <[sur@lkkauto.com](mailto:sur@lkkauto.com)>  
**Subject:** RE: SJZ1773R Finalizatinon

Dear LKK,

Can finalization this case?

Best regards,

**Mandy Neo**  
Service Consultant  
Bodyshop & Paint



**Wearnes Automotive Pte. Ltd.**  
49 Alexandra Road 159935  
F (65) 6264 7137 O (65) 97704368  
[www.wearnes.com](http://www.wearnes.com)   [mandy.neo@wearnes.com](mailto:mandy.neo@wearnes.com)

*This email, including any attachment, is confidential and may also be privileged.  
If you have received it in error, please notify us immediately by reply email and then delete this message from your system.  
Please do not copy it or use it for any purpose, or disclose its contents or any attachment to any other person. Thank you.*

---

**From:** Mandy Neo  
**Sent:** Friday, 15 December, 2017 2:54 PM  
**To:** [admin-d@lkkauto.com](mailto:admin-d@lkkauto.com)  
**Cc:** [sur@lkkauto.com](mailto:sur@lkkauto.com)  
**Subject:** FW: SJZ1773R Finalizatinon

**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	21/11/2017 12:48
Date Of Accident	09/11/2017 08:45
Exact Location Of Accident	PETAN ROAD
Country/State of Loss	SINGAPORE

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number	SJZ1773R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WEARNES AUTOMOTIVE PTE LTD
Co Reg No	199501400R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97704368
Alternative Phone No	OFFICE-63789333

**Vehicle Particulars**

Manufacturer	VOLVO
Model	S60-2.0 T (A)
Exact Purpose for which vehicle was being used at time of accident	RENTAL VEHICLE
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

**Driver**

Name of Driver	MR TEH BOO CHUA
NRIC No	S1295989C
Date Of Birth	29/03/1958
Occupation	INDOOR
Date Of Driving Pass	28/06/1981
Driving Experience	36 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	OTHERS-91185639
Email Address	NOEMAIL

Address	21 SOMMERVILLE ROAD #03-04
Postcode	358246
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RENTAL CAR
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	CLEAR
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

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

#### Circumstances of Accident

REFER REPORT

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN3103Y
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	AH GUI
NRIC/Passport Number	
Contact Number	98607060
Address	ALLINTON ENGRG & TRADING CO.LTD
Postcode	
Insurance Company Name	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

1. Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorised Driver.
4. 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.
5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

## ACCIDENT STATEMENT

Date and Time of Accident	Date: 9 NOV 17 Time: 8.45
Exact Location of Accident	Petam Road (Bick Lane)

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJ2178R
-----------------------------	---------

## INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)	WILLIAMS Automobile Pte Ltd
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
- Not Applicable	

## VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model	Manufacturer <u>LAND</u> Model <u>860</u>
Type of Vehicle*	<input checked="" type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others
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?	<input type="radio"/> Yes <input type="radio"/> No (If No, Pls select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle

## INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company *	Liberty Insurance
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input type="radio"/> No
Policy Number	SD17V00566
Motor CI	

## DRIVER

	<input type="radio"/> Same as Insured above
Name of Driver	Mr Tan Boon Chuan
Personal Identification - NRIC (Singaporean/PR)	S1245459L
- FIN/Passport Number	
Date of Birth	29 dd/ 03 mm/ 58 yy
Driving Date Pass	28 dd/ 06 mm/ 81 yy
Year of Driving Experience	30 Year(s) 6 Month(s)
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	91185249

Address of Driver	21 Sommerville Road	
Email Address	513-04	Postcode (353746)
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured		
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
<b>GENERAL INFORMATION OF THE ACCIDENT</b>		
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)		
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____	
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____	
<b>OTHER INFORMATION</b>		
Was any foreign vehicle involved in this accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was any body injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was any other vehicle or property damaged?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Was there any video captured by Car Camera?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Number of Passengers (Including Driver)		
<b>DETAILS OF POLICE ACTION</b>		
Was the Accident reported to the Police?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, please state which Police Station.)	
Police Station Name		
Police Station Address		
Police Station Contact	Tel No.	Fax No.
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If Yes, against whom?)	
<b>DETAILS OF OTHER VEHICLE / PROPERTY 1</b>		
Vehicle Registration Number	YN 3103Y	
Vehicle Make/ Model/ Colour	Volvo 15424	
Details of Properties		
Name of Driver	M. L. L. L.	
Personal Identification - NRIC (Singaporean/PR)		
- FIN/Passport Number		
Contact Number	9860 7060	
Address	Allinton Engrg & Trading Co Ltd	
Name of Insurance Company		
Nature of Damage		
No. of Passenger (Including Driver)		
(Note - Please use page 6 if you need to add more vehicles.)		

**Describe Circumstance of the Accident**

THE VOLVO CAR WAS PARKED AT MY OFFICE PARKING LOT.  
THE LURRY SIDE PANEL DID NOT SECURE PROPERLY AND <sup>AS A</sup> RESULT  
THE SQUARE METAL POLES ON THE LURRY DROPPED AND IT  
HIT THE FRONT OF THE VOLVO CAR.

**IMPORTANT NOTE**

Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

**Declaration**

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

\_\_\_\_\_  
Policyholder's Signature / Date & Time

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

\_\_\_\_\_  
Witnessed by Reporting Centre Personnel

## 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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 :

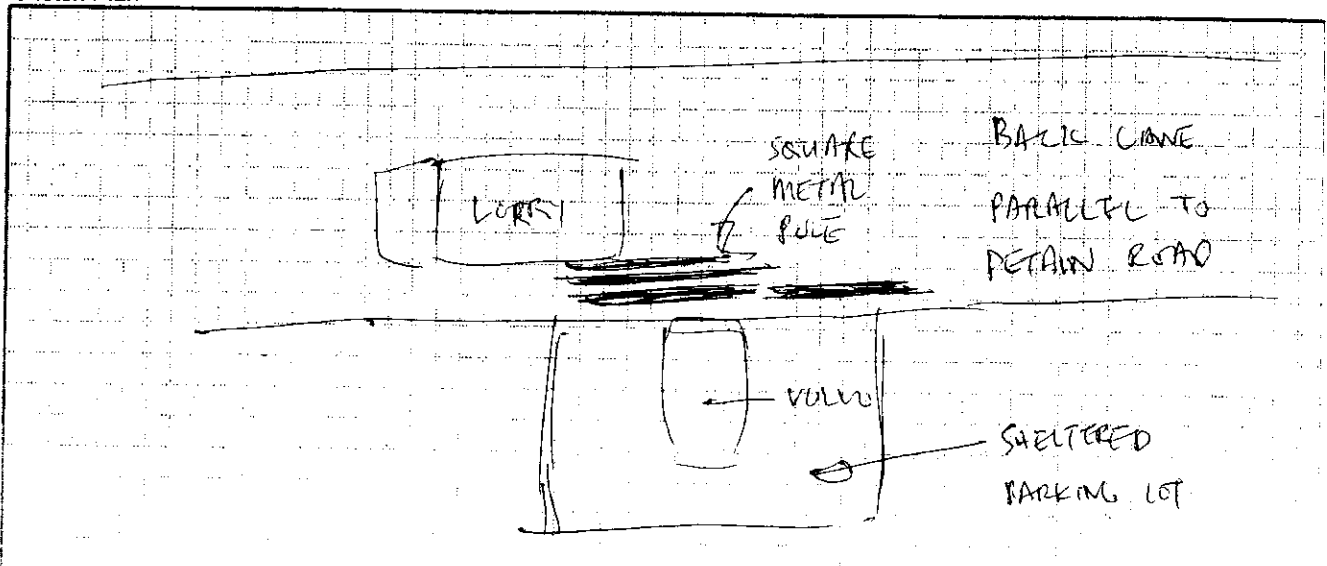
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 w ith 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 w ith applicable law in administering, processing, handling and/or dealing w ith 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

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



## SERVICE ESTIMATE

63413 - C00001 SL: SERVICE SALES - PC

Wearnes Automotive Pte. Ltd. (159-F&amp;L)

Attn: Mr Andrew Chan

45 Leng Kee Road

Singapore 159103

Closed by .... : Mandy Neo

Svc Consultant :

Remarks ..... : Wearnes Automotive P

GST Reg.No:M28920628X

Inv.No. . : B&amp;P 0 Page 1

Inv.date. : 21/11/2017

WIP No. . : 28495

Veh.In/Out: 09/11/2017 09/11/2017

\*Tel.No. . : Work: 68765093

Reg.No. . : SJZ1773R

Reg.date . : 29/10/2010

Mileage .. : 0

Chassis No: YV1FS445BB2004712

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
-------	-------------	----------	-------	-------	-----	--------	---

800	B&P Spraypainting REPLACE BUMPER INCLUDING TRANSFER	0	1600.00	0		1,600.00 S	700 / 800
-----	---	---	---------	---	--	------------	-----------

OLD PARTS

802	RESRAPHY FRONT BUMPER ASSY	0	1500.00	0		1,500.00 S	800 /
-----	----------------------------	---	---------	---	--	------------	-------

280	TO CHECK WIRING INCLUDING	0	450.00	0		450.00 S	✓
-----	---------------------------	---	--------	---	--	----------	---

RESETTING OF ALL ELECTRICAL

MODULES

BUMPER COVER FRT SV6

BUMPER GRILLE LOWER

1.0 EA 1519.90 1367.91 1,519.90 S ok

1.0 EA 116.20 104.58 116.20 S dis

Gross Total. 5,186.10

Labour Total 3,550.00

Parts Total 1,636.10

Package Total 0.00

Net..... 5,186.10

GST @ 7.0% 363.03

Total..... 5,549.15

Paid..... 0.00

Please Pay... 5,549.15

GST: S=StdRated; O=OutOfScope; Z=ZeroRated

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:

### SERVICE ESTIMATE

O - C00010	SL: CHINA TAIPIING INSURANCE (SINGAPORE)	GST Reg.No:M28920628X
CHINA TAIPIING INSURANCE (SINGAPORE) PTE LTD	Inv.No. . : B&P	0 Page 1
3 ANSON ROAD	Inv.date. : 15/12/2017	
#16-00, SPRING EAF TOWER	WIP No. . : 28495	
SINGAPORE 079909	Veh.In/Out: 07/12/2017 15/12/2017	
	*Tel.No. . : 63896111	
	Reg.No. . : SJZ1773R	
Closed by .... : Mandy Neo	Reg.date .: 29/10/2010	
Svc Consultant :	Mileage ... : 0	
Remarks ..... : Wearnes Automotive P	Chassis No: YV1FS445BB2004712	

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
800	TO REPLACE RESRAPY FRONT BUMPE	0	800.00	0		800.00	S
802	TO PUTTY & RESPPRAY BUMPEPR ASS	0	700.00	0		700.00	S
INCLUDING TRANSFER PARTS							
280	TO CHECK WIRING INCLUDING	0	450.00	0		450.00	S
RESFITTING OF ALL ELECTRICAL							
MODULES							
	BUMPER COVER FRT SV6	1.0 EA	1519.90	10		1,367.91	S
	BUMPER GRILLE LOWER	1.0 EA	116.20	10		104.58	S

Gross Total.      3,422.49

Labour Total	1,950.00		
Parts Total	1,472.49		
Package Total	0.00		

Net.....	3,422.49
GST @ 7.0%	239.57
Total.....	3,662.06
Paid.....	0.00
Please Pay..	3,662.06

GST: S=StdRated; O=OutOfScope; Z=ZeroRated

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	22 Nov 2017		22 Nov 2017 12:38 <a href="#">Edit Adj Rpt</a>	<b>S\$3,422.49</b> <a href="#">Edit Estimates</a>	<b>S\$3,422.49</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

<b>Main</b>	<b>Reference</b>	<b>Claim Details</b>	<b>Documents</b>	<b>Show All</b>
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CLAIM SUBFOLDER DETAILS				[Created by Insurer]		
Insured:	ALLINTON ENGINEERING & TRADING PTE LTD, Co. Reg. No.: 198207163M					
Main Claimant:	WEARNES AUTOMOTIVE PTE LTD, Co. Reg. No.: 199501400R					
Vehicle Reg. No.:	SJZ1773R	Date of Loss:	09/11/2017 08:00 - :59			
Claim Type:	TP / SNM17D06530C02	Policy/Cover Note No.:	DMCVSN1537791702 (Comprehensive) Coverage: 03/09/2017 - 02/09/2018			
Vehicle Reg. No. (Insured):	YN3103Y	Policy No. (Claimant):				
		Excess:	S\$0.00			
Repairer:	Wearnes Automotive Pte Ltd (Alexandra Road) 249 Alexandra Road, 159935 Alexandra - Tel: 63789370					
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]					
Claimant's Insurer:	Liberty Insurance Pte Ltd (HQ) - Tel: 6221 8611					
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 01/12/2017]					
Adj Asg. Remarks:	PLEASE PROCEED TO SURVEY AND ARRANGE FOR DIRECT SETTLEMENT.					

ASSOCIATED MAIL RECEIVED		<a href="#">View All</a>	<a href="#">Compose Case Mail</a>
There are no mail for this case.			

ALL ASSOCIATED TASKS <input type="checkbox"/>										<a href="#">View All</a>	<a href="#">Search Tasks</a>	<a href="#">Create New Task</a>	<a href="#">Complete</a>
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?				
No results.													

## Claim Documents

**\*SJZ1773R (SNM17D06530C02)**  
**[YN3103Y]**

TP

**WEARNES AUTOMOTIVE PTE LTD**

**Nov 9 2017 8:00AM**

**[ALLINTON ENGINEERING & TRADING PTE LTD]**

**Wearnes Automotive Pte Ltd**

<a href="#">Upload Documents</a>		<a href="#">Upload Photos</a>	<a href="#">Compose New Letter</a>	View <a href="#">View in Browser</a> <input type="button" value="v"/>	
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<b>Assessment Reports</b>			1 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 13:13	<b>Accident Statement</b>	Load HTM	

<b>Photos/Images</b>			3 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 13:09	<b>Accident Photo</b> [Linked Accident Report Documents]	Load JPG	<input checked="" type="checkbox"/>
2	21/11/17 13:09	<b>Accident Photo</b> [Linked Accident Report Documents]	Load JPG	<input checked="" type="checkbox"/>
3	21/11/17 13:09	<b>Accident Photo</b> [Linked Accident Report Documents]	Load JPG	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	09/01/18 11:34	<b>Odometer Reading</b>	Load JPG	<input checked="" type="checkbox"/>
2	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
3	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
4	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
5	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
6	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
7	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
8	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
9	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
10	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
11	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
12	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
13	09/01/18 11:34	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
14	09/01/18 11:34	<b>Chassis Number</b>	Load JPG	<input checked="" type="checkbox"/>
15	09/01/18 11:34	<b>Reinspection Photo</b>	Load JPG	<input checked="" type="checkbox"/>
16	09/01/18 11:34	<b>Reinspection Photo</b>	Load JPG	<input checked="" type="checkbox"/>
17	09/01/18 11:34	<b>Reinspection Photo</b>	Load JPG	<input checked="" type="checkbox"/>









  

<b>Documentation</b>			1 per page <input type="button" value="v"/>	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	22/11/17 12:26	<b>E-filed GIA report</b>	Load PDF	
2	22/11/17 12:27	<b>Quotation/Replacement/Repair invoice</b>	Load PDF	
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 12:59	<b>Accident Sketch Plan</b> [Linked Accident Report Documents]	Load TIF	
2	21/11/17 12:59	<b>Accident Sketch Plan</b> [Linked Accident Report Documents]	Load TIF	
3	21/11/17 12:59	<b>Accident Sketch Plan</b> [Linked Accident Report Documents]	Load TIF	
4	21/11/17 12:59	<b>Accident Sketch Plan</b>	Load TIF	

[Linked Accident Report Documents]

## Linked Accident Report Documents

View 

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 13:13	Accident Statement	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 13:09	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
2	21/11/17 13:09	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
3	21/11/17 13:09	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Wearnes Automotive Pte Ltd (Alexandra Road)	Thumbnail	Print
1	21/11/17 12:59	Accident Sketch Plan	 Load TIF	
2	21/11/17 12:59	Accident Sketch Plan	 Load TIF	
3	21/11/17 12:59	Accident Sketch Plan	 Load TIF	
4	21/11/17 12:59	Accident Sketch Plan	 Load TIF	

## Documents Checklist

### DOCUMENTS CHECKLIST

Reset Save Print

There are no document checklists configured.

### Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)


Show Remarks To: ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.

# LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/CT117022320/T1QBE2

Date: 15/01/2018

### REFERENCE

Handling Insurer: China Taiping Insurance  
(Singapore) Pte. Ltd.

Policy No: DMCVSN1537791702

Claimant Vehicle  
No: SJZ1773RInsured Vehicle  
No: YN3103Y

Date of Loss: 09/11/2017

Nature of Claim: TP

Claim  
No: SNM17D06530C02

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SJZ1773R**

Make &amp; Model: VOLVO S60, 2.0 T (A)

Engine No: B4204T6202313

Reg. Date: 29/10/2010 (Man. Year: 2010)

Chassis No: YV1FS445BB2004712

Colour: Brown

Odometer: 107962 km

Engine Capacity: 1999 cc

Market Value/New Car Price: N/A

Sum Insured (\$\$): **Market Value/New Car Price**

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size: 235/45 R17

Rear Tyre Size: 235/45 R17

Front Left Side: Michelin 6 mm

Rear Left Side: Michelin 6 mm

Front Right Side: Michelin 6 mm

Rear Right Side: Michelin 6 mm

*The above values represent the remaining tyre treads depth*

<b>COST OF CLAIMS</b>	<b>Repairer's</b>	<b>Adjuster's</b>	<b>Difference</b>	<b>Diff %</b>
Parts	1,636.10	1,472.49	163.61	10.00
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,550.00	1,950.00	1,600.00	45.07
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (\$\$)</b>	<b>5,186.10</b>	<b>3,422.49</b>	<b>1,763.61</b>	<b>34.01</b>
<b>+ GST 7.00/7.00% (\$\$)</b>	<b>363.03</b>	<b>239.57</b>	<b>123.46</b>	<b>34.01</b>
<b>Nett Amount (\$\$)</b>	<b>5,549.13</b>	<b>3,662.06</b>	<b>1,887.07</b>	<b>34.01</b>

### INSPECTION

Date of Assignment: 22/11/2017

Date Inspected: 07/12/2017 Inspected At:

 Wearnes Automotive Pte Ltd (Alexandra Road)  
 249 Alexandra Road  
 Singapore 159935

Estimated Period of Repair: 2.0 days

**Adjuster:** MOHD TAUFIKH BIN HAMID

**Manager:** SHIAU CHAN

*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: 15 Jan 2018)  
**Parts:** 143      **VOLVO S60 2.0 T (A) (Catalogue:Merimen Singapore 1.0)**  
**Labour:** Repairer's      **(Price-denominated Standard List)**  
**Print Code:** (Unsubmitted, no print-code for SJZ1773R)  
**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 SV6	Deformed	1,519.90 FS	*1,367.91 FS
2	1		*BUMPER GRILLE LOWER	Distorted	116.20 FS	*104.58 FS
F=Franchise part. S=SpcNett.						
<b>Total Parts (S\$)</b>					<b>1,636.10</b>	<b>1,472.49</b>

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
<b><u>Labour Items</u></b>				
1	B&P SPRAYPAINTING REPLACE BUMPER INCLUDING TRANSFER OLD PARTS	New	1,600.00	700.00
2	RESPRAY FRONT BUMPER ASSY	New	1,500.00	800.00
3	TO CHECK WIRING INCLUDING RESETTING OF ALL ELECTRICAL MODULES	New	450.00	450.00
<b>Gross Labour Cost (\$\$)</b>			<b>3,550.00</b>	<b>1,950.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >