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Report Format:

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



# 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 Internati	onale Des Experts En Autor	mobile	
MS	IG INSURANCE (	SINGAPORE) PTE LTD	Ref : CC3/MSG1702	22752/Aqb	
	RAFFLES QUAY 4-01 HONG LEON(	G BLDG SINGAPORE 048581	Date: 30-11-2017 Code: MSG		
1.		Policy Particulars	:- THIRD PARTY CLA	IM	
	Insured Veh.		Veh. Inspected	SLM 4126J	
	Policy No.		Coverage (\$)	0.00	
	Claim No.		Excess (\$)	0.00	
	Assign From		Assign Date	29/11/2017	
2.		Vehicle Parti	culars & Condition		
	Make & Model		c.c	0	
	Engine No.	HIDDEN	Year of Reg.		
	Chassis No.		Colour		
	Odometer		Steering		
	Brakes		Modification		
	General				
3.	5 (2) (U.S.) (949)	Conditi	ons of Tyres	HALL AND SON BALLIAN	
		Size	Make	Balance	
_	R/H Front Tyre			mm	
_	L/H Front Tyre			mm	
	R/H Rear Tyre			mm	
	L/H Rear Tyre			mm	
		Description	on of Damages		
		Genera	Information		
	Accident Date		Inspection Date	29/11/2017	
	Survey held at	FASTECH AUTO PTE LTD	•	.025 A. 02 <del>0 V.</del> F.	
Constitution		1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883			
a.		Re	emarks		
	A)THE INSPECTION B)IN ACCORDANCE	ON WAS CONDUCTED ON A"WIT CE TO YOUR INSTRUCTIONS, W	HOUT PREJUDICE" BASI E HAVE NOT AUTHORISI	S. ED REPAIRS.	

Note: This document has not been finalised.

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

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

Singapore 408933

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

To:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

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

Singapore 408933

Attn:

Christina Wong

Date: 23 Mar 2018

# Preliminary Advice

Insured Vehicle No : ST37P

TP Vehicle No

: SLM4126J

: SUBARU FORESTER

Accident Date

: 29/11/2017

Assignment Date Est. Duration of Repair : 05/12/2017 : 3.00

Inspection At

Date of Inspection : 29/11/2017

: FASTECH AUTO PTE LTD (HQ)

1 KAKI BUKIT AVE 6, #01-46/48/50 AUTOBAY

SINGAPORE 417883

Point of Impact / General Description of Damages The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$ :S\$	8,422.88 2,775.76
Revised Amount Check Items (Estimated) Total	:S\$ :S\$	0.00 2,775.76
Lump Sum Repair	:S\$	2,200.00

### **Total Loss Consideration**

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

#### Remarks

The vehicle is economical/not economical for repair.

(X) The above survey was conducted on a 'without prejudice' basis.

# Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Tuesday, 5 December, 2017 11:29 AM

To:

Christina Wong; 'Hasrianah Binte Hassan'

Cc:

Christopher Chionh; KKLau; SUR; Accounts (LKKAuto)

Subject:

DIRECT SURVEY INSPECTION ON WORKSHOP - FASTECH AUTO PTE LTD, DOA:

29/11/2017, SLM 4126J (TP VEHICLE), ST 37P (OI VEHICLE)

Attachments:

SLM4126 GIA.pdf

Dear Christina and Hasrinah,

Please be informed that we had inspected the vehicle SLM 4126J at M/s: FASTECH AUTO PTE LTD, 1 KAKI BUKIT AVENUE 6 #01-46/48/50 AUTOBAY SINGAPORE 417883.

Enclosed herewith a copy of TP's GIA report. The estimated cost of repair will forward to you shortly.

Meanwhile, kindly provide us the claim reference number for our necessary action.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

#### 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 witholding 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.

- Any false reporting may be referred to the Police for investigation.
   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	29/11/2017 12:47	
Date Of Accident	29/11/2017 08:55	
Exact Location Of Accident	ON LOYANG FLYOVER TOWARDS CITY	
Country/State of Loss	SINGAPORE	
•	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLM4126J	
Insured/Policyholder		
Name Of Registered Owner	LIM CHUN SHEN	
NRIC No	S8331198C	

NOEMAIL Email Address (LOCAL) +65-94388345

Mobile Phone No OTHERS-94388345 Alternative Phone No

Vehicle Particulars

SUBARU Manufacturer

FORESTER-2.0 AWD (A) Model

Exact Purpose for which vehicle was being used at PRIVATE USE 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

AXA INSURANCE PTE LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

GA180262/1 Policy Number

Cover Note Number

Driver

WONG LILI Name of Driver S8678005D NRIC No 17/02/1986 Date Of Birth INDOOR Occupation 08/08/2014 Date Of Driving Pass

3 YEARS AND 3 MONTHS **Driving Experience** 

FEMALE Gender

Mobile Number

Fax Number

Contact Number

NOEMAIL **EMail Address** 

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

0

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 NO

Was any body injured in the Accident?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

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

RFER TO SKETCH PLAN

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

ST37P

Vehicle Make/Model/Colour

VOLKSWAGEN JETTA 1.4 TSI AT 1622G5

**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

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

- Please report <u>correctly</u> 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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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 personal information personal information of insurer (collectively the "Personal Information") and disclose and transfer such vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of;
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (II) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Oate & Time:

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

Reporting Centre Personnel's Signature Name: 5, 4600

NRIC/FIN No : (809-177)

## Sketch Plan #2

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ECLARATION We declare the foregoing parti	iculars are true in every respect	e 6. 1	accorner (	
ECLARATION	iculars are true in every respect	e 6. 1	moserner (	nnel's Signature

# FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 20-0006262-D

TP MS16. Xiao Char. Estimate: 20004

Date: 29.11.2017 Vehicle Num: SLM4126J

Make/Model: SUBARU FORESTER

Chassis/Engine no:

JF 1 STSK CSH G 08 Accident Date: 29.11.2017 Claim No: 1117-20004

197,40,102	Claim	No : 1117-2000	
Qty Particular		A	mount S\$
List Item:  1 pc Rear w/s glass moulding of pc Rear boot lid inner lock  1 pc Rear logo of pc Rear subaru emblem  1 pc Rear subaru emblem  1 pc Rear Symmetrical emblem  1 pc Rear AWD emblem  2 pc Tailamp@535.50 http://display.com/disp	2(69.70	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	105.00 + 62.30 + 87.50 - 47.50 - 48.40 + 44.10 - 39.70 - 533 + 956.10 - 758 + 174.00 - 758 + 108.20 + 121.00 + 65.70 - 5,316.10
Discount 20 %:		<u>\$</u>	1,063.22 4,252.88
Nett Item:  1 set Rear Bumper clip  1 set Reversing sensor	230	\$ \$ \$	50.00 - 3 c 350.00 - 2 c 120.00 *
1 set Rear w/s glass sealant A+C A-Nett Total:		\$	520.00

# FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

20

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 20-0006262-D

Estimate: 20004

Date: 29.11.2017

Vehicle Num: SLM4126J

Make/Model: SUBARU FORESTER

Chassis/Engine no:

Accident Date: 29.11.2017 Claim No: 1117-20004

Qty Particular		Aı	mount S\$
Labour Charge: To check wiring Remove and refix rear fender inner trim, rear garnish etc Apply anti rust chemical Remove and replace reversing sensor & wiring Remove and refix rear w/s glass To spray painting and etc To remove and replace spare part and panel beating	. 860	\$ \$ \$ \$ \$	80.00 3 150.00 3 120.00 3 150.00 4 1,500.00 3
Labour Charge Total:		\$	3,650.00
	456	Adoh Lý 9/11/17. 1 03/2	tolel: 2016
LKK Auto Consultants hence notify the Repairer of the following: To resurvey before after spray painting To display damaged parts; during resurvey Pans prices are subject to confirmation Third party survey is on a "Wabout Prejudice" basis No illegal modification(s) is allowed.		)	
No illegal modification(s) is allowed.     Supplementary item(s) must be resurveyed and     Supplementary item(s) must be resurveyed and     is subject to final approval from insurance Company     is subject to final approval from insurance Company	E. & O. E. T	Total S\$: \$	8,422.88

## 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/MSG17022752/AQBN2

Date:

26/03/2018

REFERENCE

Handling

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

28774692AVW

Insurer: Claimant

SLM4126J

Insured Vehicle No:

ST37P

Vehicle No : Date of Loss:

29/11/2017

Nature of Claim:

TP

Claim No: 538818

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

SLM4126J

Make & Model:

SUBARU FORESTER, 2.0 I-L CVT AWD SR (A)

(^)

Engine No: FB20Y596947 Chassis No: JF1SJ5KC5HG086451

Reg. Date: Colour: 30/03/2017 (Man. Year: 2017) Green

Engine Capacity: Market Value/New Car Price:

1995 cc

: N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable): No Pre-accident Condition:

Odometer: 11388 km

Yes

Handbrake (Serviceable):

CONDITION OF TYRES

225/60 R17

Rear Tyre Size:

225/60 R17

Front Tyre Size: Front Left Side:

Michelin 6 mm

Rear Left Side:

Michelin 6 mm

Front Right Side:

Michelin 6 mm

Rear Right Side:

Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 4,772.88	Adjuster's 1,965.76	<b>Difference</b> 2,807.12	Diff % 58.81
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,650.00	810.00	2,840.00	77.81
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	8,422.88	2,775.76	5,647.12	67.05
Approved Total (Overridden) (S\$)		2,200.00	1.01	
(S\$)	8,422.88	2,200.00	6,222.88	73.88
+ GST 7.00/7.00% (S\$)	589.60	154.00	435.60	73.88
Nett Amount (S\$)	9,012.48	2,354.00	6,658.48	73.88

INSPECTION

Date of Assignment:

05/12/2017

Date Inspected:

29/11/2017 Inspected At:

Fastech Auto Pte Ltd (HQ) 1 Kaki Bukit Ave 6, #01-46/48/50

Autobay

Singapore 417883

Estimated Period of Repair:

3.0 days

Adjuster: ADRIAN LING

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: 26 Mar 2018)

Parts: M1-SUV SUBARU FORESTER 2.0 I-L CVT AWD SR (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SLM4126J)

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 \*.

Rec	omn	enc	hat	Parts
L/G	OHILL	ICI II	100	

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR W/S GLASS MOULDING	Not Necessary	105.00 FL	*-FL
2	1		*REAR BOOT LID INNER LOCK	Not Necessary	62.30 FL	*-FL
3	1		*REAR BOOT LID	Repair	1,315.60 FL	*-FL
4	1		*REAR LOGO	Necessary	87.50 FL	*87.50 FL
5	1		*REAR FORESTER EMBLEM	Necessary	47.50 FL	*47.50 FL
6	1		*REAR SUBARU EMBLEM	Necessary	48.40 FL	*48.40 FL
7	1		*REAR SYMMETRICAL EMBLEM	Necessary	44.10 FL	*44.10 FL
8	1		*REAR AWD EMBLEM	Necessary	39.70 FL	*39.70 FL
9	1		*TAILLAMP	N/s Cracked	1,071.00 FL	*437.00 FL
10	1		*REAR BUMPER	Deformed	956.10 FL	*758.00 FL
11	2		*REAR BUMPER SIDE RETAINER	Necessary	174.00 FL	*102.00 FL
12	1		*REAR BUMPER REFLECTOR	N/s Cut	170.00 FL	*85.00 FL
13	1		*REAR BUMPER REINFORCEMENT	Bent	396.10 FL	*396.10 FL
14	1		*REAR BUMPER TOW HOOD COVER	Deformed	58.70 FL	*58.70 FL
15	1		*REAR END PANEL	Repair	445.20 FL	*-FL
16	1		*REAR END PANEL TOP GARNISH	Not Necessary	108.20 FL	*-FL
17	1		*REAR BOOT RUBBER	Not Necessary	121.00 FL	*-FL
18	1		*REAR BUMPER LOWER EXHAUST COVER LH	Deformed	65.70 FL	*65.70 FL
19	1		*SET REAR BUMPER CLIP	Necessary	50.00 FS	*30.00 FS
20	1		*SET REVERSING SENSOR	Damaged	350.00 FS	*200.00 FS
21 F=Fra	1 inchise	nart S=Soct	*SET REAR W/S GLASS SEALANT Nett. L=ListItemDisc.	Not Necessary	120.00 FS	*-FS
				Sub Total (S\$)	5,836.10	2,399.70
			- List Item Discount on L Items	20.00/20.00% (S\$)	1,063.22	433.94
				Total Parts (S\$)	4,772.88	1,965.76

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
Labo	our Items			
1	TO CHECK WIRING	New	80.00	30.00
2	REMOVE AND REFIX REAR FENDER INNER TRIM, REAR GARNISH ETC	New	150.00	30.00
3	APPLY ANTI RUST CHEMICAL	New	120.00	
4	REMOVE AND REPLACE REVERSING SENSOR & WIRING	New	150.00	50.00
5	REMOVE AND REFIX REAR W/S GLASS	New	150.00	-
6	TO SPRAY PAINTING AND ETC	New	1,500.00	400.00
7	TO REMOVE AND REPLACE SPARE PART AND PANEL BEATING	New	1,500.00	300.00
	Gross Labour	Cost (S\$)	3,650.00	810.00

< END OF ESTIMATES >