Surveyor:	GIR	ASSIGN	MENT (Office)	102 Special in		2798
From (Person	ERIC WUO	of	1PC	Date	Time: 10-Soam@	36/11/201
Estimated Co	st:		Bill to:			
OD (IP)W	STTP RES / OD RES					
To Inspect V	chicle No:	SIN 396	52M	Insured:	GT6760L	-
at Workshop	m/sS	Three Au	omotive	Tel:(5284 1542	8.4
of Blk8	sin Ming Ind.			643	'	
Policy No:_		, ,, ,, ,	Claim No:	17/17/17	/vc00/020230	1
Sum Insured		2.	Excess:			1
Make of Veh				D.0	A 27/11/2017	
(Client's Recon		1. ~/	1/1=	7100/2		
CA / REV	/ REP. / REV 24 H	RS W			O.D. Endorsement:	
		. D C	ted: Yan Iel	Vehic	ie IN OUT	
	11.09 am @ 30/11/	Person Contac	- 1			
		,	, 0	10		
Date/Time:	Action/Instruction	(~) Estin	, 0	10		
Date/Time:	Action/Instruction SLN 3962	(~) Estin	, 0	1		
Date/Time:	Action/Instruction	(~) Estin	, 0	1		
Date/Time:	Action/Instruction SLN 3962	(~) Estin	, 0	1		
Date/Time:	Action/Instruction SLN 3962	(~) Estin	, 0	30		

: Prell. Report	Days Of Repair: う Resurvey No. of Trip:	Survey Ree		
Sats Time Fixe Ratum to 1		Transportation		
8	Add Fee: Site Insc. 15	1124956		
	Internel 5			
Report Format: 7P				
Lume Sum (12/03 3900	(Vescent)			
	×		330	



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

LON	PAC INSURANCE	BHD	Ref : CS/LPC170227	780/Gqb					
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date: 30-11-2017 Code: LPC2							
1.		Policy Particulars	:- THIRD PARTY CLA	M					
	Insured Veh.	GT 6760L	Veh. Inspected	SLN 3962M					
	Policy No.		Coverage (\$)	0.00					
	Claim No. 17/17/17/VC00/020239		Excess (\$)	0.00					
	Assign From	ERIC WOO	Assign Date	30/11/2017					
2.	A Care Care Land	Vehicle Parti	culars & Condition						
	Make & Model		c.c	0					
	Engine No.	HIDDEN	Year of Reg.						
	Chassis No.		Colour						
	Odometer	÷	Steering						
	Brakes		Modification						
	General								
3.		Condit	ions 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.		Descripti	on of Damages	No. of Parameter					
5.	a Sunterior Into	Genera	I Information						
	Accident Date	27/11/2017	Inspection Date						
	Survey held at	S THREE AUTOMOTIVE & REG	COVERY PTE LTD						
	September 44000 * Construction (Colonia)	BLK 8 SIN MING IND EST #01-64/66 SINGAPORE 575643							
5a.	LANDER PROPERTY	R	temarks						

Reference No .: Callectfor 780 Gab Policy Type: OD / TP / TP RES / TL / EVA Case Handler Typist): Case handler to make sure all Information created by the assignment team are ACCURATE. Admin (Y-Date N-Date Y-Date N-Date (1) Office Assign Form Reference No. C Customer Code C Assign From N C Assign Date Veh No (Inspected) C Veh No (Insured) C D.O.A Policy No C Claim No C Insurance Authorisation (CA /REV/REP) C Report Type C Weekend Charges Survey held at/Repairer N C Excess Surveyor (Guo Rang): Case handler to make sure the surveryor completed all required information. (1) Assignment Form C Vehicle No C Regn Month/Year N . Vehicle Type Make & Model N C Engine Capacity. (C.C) Colour C Odometer. (Sp.Reading) C Chassis No N General Condition N Steering Brake Modification (Modi) C Tyre Size Tyre Make N C Tyre Balance C Date of Inspection Survey held N N Des.of Damages (2) System - (Views/Merimen) Damaged Vehicle Photographs Uploaded (3) Workshop Estimate/Assignment Form ALL Parts condition Market Value for OD cases Estimate Repair Cost for PRI (RSI, TMI, MSIG) C Days of repair Finalised Amount C Re-inspection Cases to Finalize within 5 Days (4) System - (Views/Merimen) Resurvey photo Uploaded Check By:

Date

Survey Department Check List (Case Handler)

SLN 396>M

Case Handler

Nivitha (LKK Auto)

From:

ERIC WOO JUN KIAT <ericwoo@lonpac.com>

Sent:

Thursday, 30 November, 2017 10:50 AM

To:

Sim Teo Koon

Cc: Subject: 'S Three Automotive'; assignments@lkkauto.com; MT_Claim_SG RE: Accident involving SLN3962M & GT6760L on 27-11-2017. Y ref:

17/17/VC00/020239; O ref: JEQ/170922/1117/S3

Attachments:

30112017104729.pdf

Dear Teo Koon,

Noted. We will proceed to arrange surveyor for PRI.

Dear Catherine,

FYA.

Thank you.

Best Regards, Eric Woo

Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6279 9253 | Fax: (65) 6296 3767

From: Sim Teo Koon [mailto:tk_sim@juseq.com.sg]
Sent: Thursday, 30 November, 2017 10:35 AM

To: MT_Claim_SG Cc: 'S Three Automotive'

Subject: Accident involving SLN3962M & GT6760L on 27-11-2017. Y ref: 17/17/17/VC00/020239; O ref:

JEQ/170922/1117/S3

Dear Sir,

We refer to your letter.

Our client is agreeable to appoint Xing Guo Qiang as a single joint expert.

Please be informed that our client's motor vehicle is available for inspection at the under-stated workshop: -

S THREE AUTOMOTIVE RECOVERY PTE LTD

Blk 8 Sin Ming Industrial Estate #01-64/66, Singapore 575643

Tel: 6284 1542; Fax: 6487 5315

Regards,

Sim Teo Koon JusEquity Law Corporation 171 Chin Swee Road #02-06, CES Centre Singapore 169877 Tel: 6506 6488 / 6536 9339

Fax: 6536 5368

E-mail: tk sim@juseq.com.sg

This message (and all its attachments) is intended only for the use of the individual or entity to whom it is addressed and is privileged and confidential. If you are not the intended recipient, please notify us immediately by return electronic mail, delete this message and you should not disseminate, distribute or copy any information contained herein.



JusEquity Law Corporation

ADVOCATES & SOLICITORS • COMMISSIONER FOR OATHS

171 Chin Swee Road #02-06, CES Centre, Singapore 169877 Telephone (65) 6536 9339. (65) 6253 1812, (65) 6397 2008, (65) 6533 2327 Fax: (65) 6253 0120 (Conveyancing), (65) 6536 5368 (Litigation) Email: Juseq@singnot.com.sg

Our Ref:

JEQ/170922/1117/ S3 (ZUL)

Your Ref:

GT6760L

29 November 2017

SHENG TAI TOYS PTE LTD 1 Kaki Bukit Road 2 #03 – 07 Eunos Warehouse Complex Singapore 417835

By Post Only

LONPAC INSURANCE BHD

Singapore

By Fax: 6296 2706 Only

Dear Sir

ACCIDENT INVOLVING SLN3962M & GT6760L ON 27-11-2017

We act for the owner of vehicle no. SLN3962M.

We hereby notify you of a road traffic accident on 27 November 2017 at about 0810hrs, at Braddell Road involving our client's vehicle ad vehicle registration no, GT6760L driven by you / your insured at the material time. A copy of our client's report is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let me know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully

CONFIDENTIALITY CAUTION

This message is intended only for the use of the individual or entity to whom it is addressed and contains information that is privileged and confidential. If you, the reader of this message, are not the intended recipient, you should not disseminate, distribute or copy this communication. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our expense. Thank you,

Enquire Transfer Fee

Vehicle Details			
Vehicle No.	SLN3962M		
Vehicle Type	R11 - Private Hire (Self-Drive) State	ion Wagon/Jeep/Land Rov	er
Vehicle Attachment 1	With Roof Rack		
Vehicle Scheme	Normal		
Vehicle Make	AUDI		
Vehicle Model	Q5 2.0 TFSI QU (180 BHP)		
Chassis No.	WAUZZZ8R1HA075992		
Propellant	Petrol		
Engine No.	CNC181620		
Engine Capacity	1984 cc		
Maximum Power Output	132.0 kW (177 bhp)		
Maximum Laden Weight	2380 kg		
Unladen Weight	1845 kg		
Year Of Manufacture	2016		
Original Registration Date	29 Apr 2017		
Lifespan Expiry Date			
COE Category	B - Car above 1600cc or 97kW (1	30bhp)	
Quota Premium	\$54,405.00		
COE Expiry Date	28 Apr 2027		
Road Tax Expiry Date	28 Apr 2018		
PARF Eligibility Expiry Date	28 Apr 2027		
Inspection Due Date	28 Apr 2020		
Intended Transfer Date	04 Dec 2017		
CO2 Emission	175.00 (g/km)		
CEVS Rebate Utilised Amount	17.1		
fee(s) payable.	e imposed if road tax / lay up has expi Payment (if any), of a vehicle will folk insferred.		
Amount Payable	"你是我们是 对自己是是我		
Amount ayable	Amount Before GST	GST Amount (S\$)	Amount After GST

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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.

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	29/11/2017 10:40					
Date Of Accident	27/11/2017 08:10					
Exact Location Of Accident	ALONG BRADDELL RD(TUNNEL)TOWARDS BARTLEY RD					
Country/State of Loss	SINGAPORE					
	DETAILS OF OWN VEHICLE					
Vehicle Registration Number	SLN3962M					
Insured/Policyholder	THE REPORT OF THE PROPERTY OF THE PERSON OF					
Name Of Registered Owner	NATIONAL CAR RENTALS (PRIVATE) LIMITED					

Name Of Registered Owner 196100157E

Co Reg No NOEMAIL **Email Address**

Mobile Phone No OFFICE-97216254 Alternative Phone No

Vehicle Particulars AUDI Manufacturer Q5

Model Exact Purpose for which vehicle was being used at WORK PURPOSE time of accident

Are you claiming under your own insurance policy NO for repair to your vehicle?

THIRD PARTY If No, Please state action to be taken PRIVATE CAR

Vehicle Category

Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD Name of Insurance Company THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage NO Fleet Policy

5059475530-04 Policy Number

Cover Note Number

Driver SUCI PALUPI RETNANINGSIH Name of Driver G5232517Q

NRIC No 28/10/1974 Date Of Birth OUTDOOR Occupation 10/12/2012 Date Of Driving Pass

4 YEARS AND 11 MONTHS Driving Experience

FEMALE Gender

(LOCAL) +65-97216254 Mobile Number

Fax Number Contact Number

NOEMAIL **EMail Address**

Address

7 THOMSON LANE

#40-05

Postcode

297726

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

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 ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

GT6760L

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Page 2 of 13

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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:
 - 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.

Tropic

Policyholder's Signature Date & Time: Ju-

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.

Sketch Plan #2 Pg. 1

TCH PLAN	Minny	bracket	word	(turnut)	twant e	DAMEN)
		++++	+++			111
					+++++	111
			111			
	(10)		1111			
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					VENTUE M	2 4 296
					Vehicu B	51 6 396
					-L-Warani - Warani	
ESCRIBE CIRCUMSTANCES O		A	\$100.00	dan m	ad (tunu	01)
www driving	SHALDHT	along	bra	older Wa	all (JINAIN	x1),
J		188			1 0.1	1
suddening vel	nicu B (ramo two	V 106	enind av	d wild	201
S. E.						
onto the real	POAIM	et mu	vel	nille. t	le apologi	reel
CF 10 174 15		-				
as the world	was Wet	and sipp	em).			
1000		7. J.				
			17-5			
		- Ventre				
	- North					
		MOST SECTION				
					(-12)	
					2/1	
DECLARATION					11/1	
thate declare the foregoing par	ticulars are true in ev	ery respect.				
I/We declare the foregoing par	ticulars are true in ev	ery respect.			1	
I/We declare the foregoing par	ticulars are true in eve	ery respect.		1	1	
I/We declare the foregoing par	Driver's Sign			Reporting C	entre Personnel's S	ignature

GIARMC SketchPlanForm_V3



S THREE AUTOMOTIVE RECOVERY PTE LTD

BLK 8 SIN MIN INDUSRTIAL ESTATE #01-64/66 (S) 575643 Tel: (65) 6284 1542 / (65) 6284 1575 Fax: (65) 6487 5315 Reg. No: 201325741R

PRO FORMA INVOICE

INVOICE NO	0410				
DATE	18/12/2017				
VEHICLE NO	SLN3962M				
MAKE/MODEL	AUDI Q5				

NAME NATIONAL CAR RENTAL PTE LTD

ADDRESS 390A HAVELOCK ROAD

#01-07 WATERFRONT PLAZA

SINGAPORE 169664

S/NO.	DESCRIPTION	UNIT	AMOUNT	
_1	REPAIR COST FOR VEHICLE SLN3962M	1 5	5,950.00	
	*-			
			W 1005 D30-7-74-	
			\$5,950.0	
10000		7%gst	\$416.5	
	1	TOTAL AMOUNT	\$6,366.5	

STYREE AUTOMOTIVE RECOVERY PTE LTD
Bilk 8 Sin Ming Inclustrial Estate
#01-64/66 Singapore 575643
Tel: 6264 1542 / 6284 1575
FRX: 6467 5376

sthreeautomotive@gmail.com

JOEY KHO

S THREE

S THREE AUTOMOTIVE RECOVERY PTE LTD

ATTN	: MOTOR CLAIM DEPT.	T/P VI	EH. NO. : C	T6760	L		
-	MATE REPORT 1st QUOTATION IER'S PARTICULAR	JOI	B NO :				
NAM		CO	NTACT:				
	RESS:	CHAS	SSIS NO:				
	NSE NO. : SLN3962M TRAN! E / MODEL : AUDI Q5		INE NO:				
OWN	IER'S INSURER :	V 100 1-1000-1 15			924		
JOB-	CODE: TP S/A: MICHELLE	ACCDEN	T DATE : 2	27-Nov-	17		
CLA	IM DETAIL			DISC			
MAT	TERIALS	QTY QU	O-PRICE	,	DISC- PRICE	SUR. DISP	
1	TAILGATE CHROME MOULDING / Sek	1.00	280.00	0.00	280.00	Y	140
2	TAILGATE LOGO / /	1.00	85.00	0.00	85.00	Y	1
3	TAILGATE EMBLEM TFSI'	1.00	45.00	0.00	45.00	Y	1
4	TAILGATE EMBLEM 'QUATTRO'	1.00	45.00	0.00	45.00	Y	
5	TAILGATE EMBLEM Q5	1.00	55.00	0.00	55.00	Y	
6	REAR BUMPER / De	- 1.00 / 1	1580.00	0.00	1580.00	Y	1385
7	REAR BUMPER WIRING HARNESS FAN SENSOR	X 1.00	632.00	0.00	632.00	Y	X
8	REAR BUMPER REFLECTOR RH	1.00 BY	230.00	0.00	230.00	Y	115
9	REAR BUMPER REFLECTOR LH	1.00	230.00	0.00	230.00	Y	_115
10	REAR BUMPER INNER SPONGE Q / COYX	1.00	15.00	0.00	15.00	Y	_/_
11	REAR BUMPER INNER PLASTIC X/	1.00	75.00	0.00	75.00	Y	X
12	REAR BUMPER BRACKET LH &	1.00	48.00	0.00	48.00	Y	
13	REAR BUMPER BRACKET RH 🛠 /	1.00	48.00	0.00	48.00	Y	
14	REAR BUMPER RETAINER LH / LMC	1.00	75.00	0.00	75.00	Y	_/_
15	DEAR RUMPER RETAINER RH	1.00	75.00	0.00	75.00		
16		2.00	1060.00	0.00	1060.00		
17	REAR BUMPER LOWER COVER CENTRE /	1.00	330.00	0.00	330.00		
18	H	1.00	980.00	0.00	980.00		_549_
19	REAR END PANEL INNER X REPORT	1.00	520.00	0.00	520.00		
20	.,)/*/	1.00	180.00	0.00	180.00		X
21	REAR END INNER GARNISH X	1.00	135.00	0.00	135.00		_X,
22		1.00	2450.00	0.00	2450.00		X
23		1.00	520.00	0,00	520.00		X
24	, ,	1.00	198.00	0.00	198.00		X
25		1.00	580.00	0.00	580.00		270-
26	TAILGATE RUBBER BEADING X / TW	1.00	260.00	0.00	260.00) Y	150.
							3449
	TOTAL (PARTS):		10731.00		10731.00)	, , ,
						1	04:2104

SPEC	CIAL NETT ITEM						./
1	TAILGATE TRIM BOARD CLIPS X NN	1.00	80.00	0.00	80.00	Y	X
2	REVERSE SENSOR 4PCS AND	4.00	1120.00	0.00	1120.00	Y	388
3	REAR FENDER INNER CLIPS X NN	1.00	50.00	0.00	50.00	Y	X
4	REAR BUMPER CLIPS / MC	1.00	50.00	0.00	50.00	Y	
5	REAR NO PLATE X NN	1.00	50.00	0.00	50.00	Y	
	TOTAL (PARTS):		1350.00		1350.00		438
LAB	OUR				1.4 \$44.4000.00		HE C
1	STRENGTHEN & PANEL BEAT ACCIDENT AREA	1.00	1200.00	0.00	1200.00	Y	400 300
2	SPRAY PAINTING ON AFFECTED AREA	1.00	1600.00	0.00	1600.00	Y	600
3	R&R TAILGATE COMPONENTS	1.00	180.00	0.00	180.00	Y	X
4	R&R AND RESET REVERSE SENSOR	1.00	150.00	0.00	150.00	Y	40
5	R&R EXHAUST MUFFLER	1.00	280.00	0.00	280.00	Y	100
6	R&R INNER TRIM & CARPET TO REPAIR	1.00	150.00	0.00	150.00	Y	60
7	RESPRAY KOTO TUFF ON ACCIDENT AREA	1.00	180.00	0.00	180.00	Y	X NN
8	CHECK WIRING SYSTEM	1.00	80.00	0.00	80.00	Y	_30_
	TOTAL (LABOUR):		3820.00		3820.00		1330
	TOTAL PARTS & LABOUR		15901.00		15901.00		

.

	4 872.1
EXCESS: :S\$	20%: 3900
NO. OF DAY :	Marine &
RE-SURVEY: BEFORE / AFTER PAINTING	() 1,2/10.
PART-BY-PART OR LUMP-SUM : SS	0 08/11
DATE OF SURVEY : 0 [/ [2 / 1]	
SURVEY BY : Gu QIOF.	
CONTACT NO :	FAX NO :

NOTE: LUMP-SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED.

	LIKK Almo Constittants hence notify	
	the key liver of the following:	
	- To mentury before after spray painting	
	To dis any damaged part(s) during resurvey	
	made water are subject to confirmation	
	Third party survey is on a "Without Prejudice" basis	
	No illegal modification(s) is allowed	
	No illegal modification(s) to another programmers and	
	Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company	
ŀ	Acknowledged by Repairer	
١	Signature:	
١	Date:	



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

ON	PAC INSURANCE	BHD	Ref : CS/LPC17022780/Gqbn2			
300 1	BEACH ROAD	DURSESINGAPORE 199555	Date: 07-03-2018 Code: LPC2			
. 8		Policy Particulars	:- THIRD PARTY CLAIM			
	Insured Veh.	GT 6760L	Veh. Inspected	SLN 3962M		
	Policy No.		Coverage (\$)	0.00		
	Claim No.	17/17/17/VC00/020239	Excess (\$)	0.00		
	Assign From	ERIC WOO	Assign Date	30/11/2017		
2.		Vehicle Parti	culars & Condition			
	Make & Model	AUDI Q5	c.c	1984		
	Engine No.	HIDDEN	Year of Reg.	2017		
	Chassis No.	WAUZZZ8R1HA075992	Colour	WHITE		
	Odometer	7195	Steering	IN ORDER		
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM		
	General	GOOD				
3.		Condit	ions of Tyres			
		Size	Make	Balance		
	R/H Front Tyre	235/60 R18	BRIDGESTONE	8 mm		
	L/H Front Tyre	235/60 R18	BRIDGESTONE	8 mm		
	R/H Rear Tyre	235/60 R18	BRIDGESTONE	8 mm		
	L/H Rear Tyre	235/60 R18	BRIDGESTONE	8 mm		
4.	Description of Damages					
	THE VEHICLE SU	STAINED DAMAGES AT THE RE	EAR PORTION.			
	DAMAGES SEE DETAILS.					
5.	General Information					
	Accident Date	27/11/2017	Inspection Date	01/12/2017		
	Survey held at	S THREE AUTOMOTIVE & RECOVERY PTE LTD				
		BLK 8 SIN MING IND EST #01-64/66 SINGAPORE 575643				
	Remarks					
5a.			THE PRE HIDIOER DAC	8		
5a.	A)THE INSPECTION B)IN ACCORDAN	ON WAS CONDUCTED ON A"WI CE TO YOUR INSTRUCTIONS, V	WE HAVE NOT AUTHORIS	ED REPAIRS.		



51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLN 3962M

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAILGATE CHROME MOULDING	SCRATCHED	280.00	140.00
1	TAILGATE LOGO	NECESSARY	85.00	85.00
1	TAILGATE EMBLEM "TFSI"	NECESSARY	45.00	45.00
1	TAILGATE EMBLEM "QUATTRO"	NECESSARY	45.00	45.00
	TAILGATE EMBLEM Q5	NECESSARY	55.00	55.00
1	REAR BUMPER	DEFORMED	1,580.00	1,385.00
1	REAR BUMPER WIRING HARNESS FAN SENSOR	NOT NECESSARY	632.00	-
1	REAR BUMPER REFLECTOR RH	CRACKED	230.00	115.00
1	REAR BUMPER REFLECTOR LH	CRACKED	230.00	115.00
1	REAR BUMPER INNER SPONGE	CRACKED	15.00	15.00
	REAR BUMPER INNER PLASTIC	NOT NECESSARY	75.00	
1	REAR BUMPER BRACKET LH	NOT NECESSARY	48.00	-
1	REAR BUMPER BRACKET RH	NOT NECESSARY	48.00	-
1	REAR BUMPER RETAINER LH	NECESSARY	75.00	75.00
1	REAR BUMPER RETAINER RH	NECESSARY	75.00	75.00
2	REAR BUMPER TOWING COVER	NOT NECESSARY	1,060.00	-
1	REAR BUMPER LOWER COVER CENTRE	DEFORMED	330.00	330.00
1	REAR BUMPER REINFORCEMENT	BENT	980.00	549.00
1	REAR END PANEL INNER	TO REPAIR SEE LABOUR	520.00	
1	REAR END INNER CHROME PANEL	NOT NECESSARY	180.00	-
1	REAR END INNER GARNISH	NOT NECESSARY	135.00	
1	REAR EXHAUST MUFFLER	TO REPAIR SEE LABOUR	2,450.00	-
1	REAR EXHAUST HEAT SHIELD	NOT NECESSARY	520.00	
1	REAR BOOTLID LOCK	NOT NECESSARY	198.00)
9	KEYLESS SENSOR	DAMAGED	580.00	290.00
88	TAILGATE RUBBER BEADING	TORN	260.00	130.00
	LESS 10% DISCOUNT			-344.90
			10,731.00	3,104.10
	SPECIAL NETT ITEMS	3		
	TAILGATE TRIM BOARD CLIPS (SN)	NOT NECESSARY	80.00	P
	REVERSE SENSOR 4PCS (SN)	NOT WORKING	1,120.00	388.00
	REAR FENDER INNER CLIPS (SN)	NOT NECESSARY	50.0	0

Report Ref No. CS/LPC17022780/Gqbn2



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR BUMPER CLIPS (SN)	NECESSARY	50.00	50.00
1	REAR NO PLATE (SN)	NOT NECESSARY	50.00	10
			1,350.00	438.00
	LABOUR			
	STRENGTHEN & PANEL BEAT ACCIDENT AREA.INCLUSIVE OF THE REPAIR OF REAR END PANEL INNER AND REAR EXHAUST MUFFLER.		1,200.00	500.00
	SPRAY PAINTING ON AFFECTED AREA.		1,600.00	600.00
	R&R TAILGATE COMPONENTS.	NOT NECESSARY	180.00	
	R&R AND RESET REVERSE SENSOR.		150.00	40.00
	R&R EXHAUST MUFFLER.		280.00	100.00
	R&R INNER TRIM & CARPET TO REPAIR.		150.00	60.00
	RESPRAY KOTO TUFF ON ACCIDENT AREA.	NOT NECESSARY	180.00	
	CHECK WIRING SYSTEM.		80.00	30.00
			3,820.00	1,330.00
	GRAND TOTAL		15,901.00	4,872.10
SAN	RECOMMENDED COST OF LUMP SUM REPAIRS	Particular Styles	Line of the latest the	3,900.00

Report Ref No. CS/LPC17022780/Gqbn2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

(TO ITS PRE-ACCIDENT CONDITION)

ADRIAN LING WAI PING

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

Licensed Appraiser

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