



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

M NEDUMARAN & CO*

Ref : CS/LAW17023016/T1vb

No. 11 SIN MING ROAD
#B2-09 (UNIT 2), THOMSON V TWO
SINGAPORE 575629

Date : 05-12-2017



Code : L134

1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)

Insured Veh.	SJU 2932T	Veh. Inspected	PC 2009H
Policy No.	PCS.CCC.2017.213930.TM	Coverage (\$)	0.00
Claim No.	MN/IG/E2/1611043	Excess (\$)	0.00
Assign From	IGENE LIM	Assign Date	30/11/2017

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

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5. General Information

Accident Date	27/06/2016	Inspection Date	06/12/2017
Survey held at	38 WOODLANDS IND PARK E1 #05-13		
Repairer	EMERSON AUTOMOTIVE SERVICES PTE LTD		

5a. Remarks

--

Catherine Chong (LKK Auto)

From: Igene Lim <igene.lim@mneduco.com.sg>
Sent: Thursday, 30 November, 2017 2:47 PM
To: Belle
Cc: Charlene Chee; Catherine Chong (LKK Auto); Celine Fong (LKKAuto); 'SUR'; 'assignments'
Subject: RE: Yr Ref: MN/IG/E2/1611043; COMLAW Ref: PCS.CCC.2017.213930.TM

WITHOUT PREJUDICE

Our Ref : MN.IG.E2.1611043

Hi Belle,

Have you written to LKK Auto Consultants Pte Ltd and is there a reply from them?

Hi Catherine,

Parties have agreed to the appointment of Mohamad Taufikh Bin Hamid as a Single Joint Expert ("SJE") in this action.

We have made an arrangement for our client's vehicle **PC 2009H** to be available for re-inspection as follows:

Date : **6 December 2017 (Wednesday)**
Time : **9.30 a.m.**
Venue : **EMERSON AUTOMOTIVE SERVICE PTE LTD**
38 Woodlands Industrial Park E1, #05-13, Singapore 757700
Contact : **Raymond @ 9815-8858**

Please let us have your written confirmation on the above arrangement urgently.

Kindly also ensure the appointed surveyor attends to the above without fail.

With thanks & regards,

IGENE LIM (MS)

(For and on behalf of Mr Nedumaran Muthukrishnan)

M NEDUMARAN & CO

Advocates & Solicitors

Commissioner for Oaths

Branch Office :

No. 11 Sin Ming Road

#B2-09 (Unit 2), Thomson V Two

Singapore 575629

Tel : 6509-8480 / 6509-8481

Fax : 6509-8482

Email : igene.lim@mneduco.com.sg

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From: Igene Lim
Sent: Monday, November 27, 2017 4:13 PM
To: 'Belle' <belle@comlaw.com.sg>
Cc: Charlene Chee <charlenechee@comlaw.com.sg>
Subject: RE: Yr Ref: MN/IG/E2/1611043; COMLAW Ref: PCS.CCC.2017.213930.TM

WITHOUT PREJUDICE

Our Ref : MN.IG.E2.1611043

Hi Belle,

We have no objection to your draft copy of the letter to LKK Auto Consultants Pte Ltd.

You may proceed accordingly at your end.

We will make arrangement for the re-inspection on the Plaintiffs' vehicle as soon as we hear from LKK Auto Consultants on their charges for the SJE's fees.

With thanks & regards,
IGENE LIM (MS)
(For and on behalf of Mr Nedumaran Muthukrishnan)
M NEDUMARAN & CO
Advocates & Solicitors
Commissioner for Oaths

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From: Belle [<mailto:belle@comlaw.com.sg>]
Sent: Thursday, November 23, 2017 2:41 PM
To: Igene Lim <igene.lim@mneduco.com.sg>
Cc: Charlene Chee <charlenechee@comlaw.com.sg>
Subject: Yr Ref: MN/IG/E2/1611043; COMLAW Ref: PCS.CCC.2017.213930.TM

Dear Igene,

Please see attached a draft to M/s LKK Auto Consultants Pte Ltd, for your approval.

Please let us hear from you soon.

Thank You and Best Regards

Ms Balqis (Bel)

Secretary

For and on behalf of **Ms Charlene Chee**
Associate Director

M/s ComLaw LLC

64 Cecil Street

#03-02 IOB Building

Singapore 049711

Tel: (65) 6538 1221

Direct Fax: (65) 6506 9156

DID : (65) 6506 9162

Email: belle@comlaw.com.sg

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ComLaw LLC

Advocates & Solicitors, Notaries Public & Commissioners for Oaths
64 Cecil Street #06-04, #03-02 IOB Building, Singapore 049711

COMLAW LLC is a law corporation with limited liability (Regn. No. 200105172H)
(Incorporating Piah, Tan & Partners)

Directors
Gertrude Chan
Chua Li Suan
Yeo Piah Chuan
Tan Siah Yong
Charles Phua

Associate Directors
D. Vivekananda
Felicia Ng
Charlene Chee

Associates
Crystal Goh
Herman Lee
Sancia Ng
Douglas Pang

Our Ref PCS.CCC.17.213930.TM

Direct Line : 6506 9168 – Charlene Chee
charlenechee@comlaw.com.sg

Your Ref : TBA

Secretary : 6506 9162 – Balqis (Bel)
belle@comlaw.com.sg

Your Fax : 6844 8805 – Via Fax & HAND

Direct Fax No : 6506 9156

30 November 2017

M/s LKK AUTO CONSULTANTS PTE LTD
51 Ubi Avenue 1
#01-25 Paya Ubi Industrial Park
Singapore 408933

Attention: Mr Mohamad Taufikh Bin Hamid

Dear Sirs,

MC/MC 637/2017- N SUNDRASEGARAN T/A GAYA TRANSPORT AND SERVICES

We refer to the above matter.

We act for the Defendant (vehicle no. SJU2932T) and M/s M. Nedumaran & Co act for the Plaintiff (vehicle no. PC2009H).

Please be informed that by consent of all parties, you are appointed as the Single Joint Expert for this action to provide an independent assessment in respect of costs of repairs for vehicle no. PC2009H. **We enclose herewith relevant documents as follows (Annexure A):-**

1. All parties' GIA Reports and police reports;
2. All parties' damage photographs;
3. Final Repair Bill;
4. Survey Report by SK Auto Consultants;
5. Re-inspection Report from HM Automotive Appraisal Services.

Kindly note that as a Single Joint Expert appointed by the Court, your primary duty is to the Court and you are required to give a fair and reasonable assessment of costs for PC2009H.

We are instructed in particular, for the SJE to assess and consider, whether the left sliding door and left panel of the Plaintiff's van were damaged in the current road traffic accident of 27.06.16. This is because the Plaintiff's van was involved in an earlier road traffic accident of 02.11.15.

We also enclose the Plaintiff's previous GIA report and coloured photographs of the van attached to the said report in addition to the other relevant documents **(Annexure B)**.

Therefore, please let us have your views on the same in addition to the usual assessment of Costs of Repairs and period of repairs required.

COMLAW LLC
Advocates & Solicitors

2

CONTINUATION SHEET

Please let us have your Single Joint Report in due course.

Yours faithfully,


CHARLENE CHEE

Enc.

cc:
M/s M. NEDUMARAN & CO
[Yr Ref: MN.IG.E2/1611043]
Via Fax Only: 6509 8482 [Via email: lgene.lim@mneduco.com.sg]

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Your Ref TBA

Your Fax : 6844 8805 – Via Fax & HAND

Direct Line : 6506 9168 – Charlene Chee
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30 November 2017

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Please let us have your Single Joint Report in due course.

Yours faithfully,



CHARLENE CHEE

Enc.

cc:

M/s M. NEDUMARAN & CO

[Yr Ref: MN.IG.E2/1611043]

Via Fax Only: 6509 8482 [Via email: igene.lim@mneduco.com.sg]

ANNEXURE

A

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	28/06/2016 11:08
Date Of Accident	27/06/2016 15:30
Exact Location Of Accident	Junction of Ang Mo Kio Ave 3 & Ang Mo Kio Ave 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC2009H
Insured/Policyholder	
Name Of Registered Owner	GAYA TRANSPORT AND SERVICES
Co Reg No	53238237D
Email Address	srisundra@gmail.com
Mobile Phone No	
Alternative Phone No	Office-97399153
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE-3.0 D High-roof 14 Seater (A)
Exact Purpose for which vehicle was being used at time of accident	FETCH CUSTOMER
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	Bus
Insurance Company	
Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5073122090
Cover Note Number	05/08/15 - 04/08/16
Driver	
Name of Driver	NADARAJAN SUNDRASEGARAN
NRIC No	S0177073Z
Date Of Birth	11/10/1953
Occupation	Outdoor
Date Of Driving Pass	28/02/1976
Driving Experience	40 Years And 3 Months
Gender	Male
Mobile Number	(Local) +65-97399153
Fax Number	
Contact Number	
Email Address	srisundra@gmail.com

Address	BLK 324 YISHUN CENTRAL #03-295
Postcode	760324
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Owner
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Unknown - TP CUT INTO INSURED'S LANE
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	Yes
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 TO SKETCH ATTACHED.

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJU2932T
Vehicle Make/Model/Colour	BLACK TOYOTA WISH
Details Of Properties	
Name of Driver	JALALUDIN BIN ABDUL KARIM
NRIC/Passport Number	S1071564D
Contact Number	90266545
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

VEHICLE NO.: PC2009H

INSURER : N711C

DOA : 21/06/16 15:30

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 willful 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 Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my 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.



Policy holder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel YS

Sketch Plan

P.T.O.

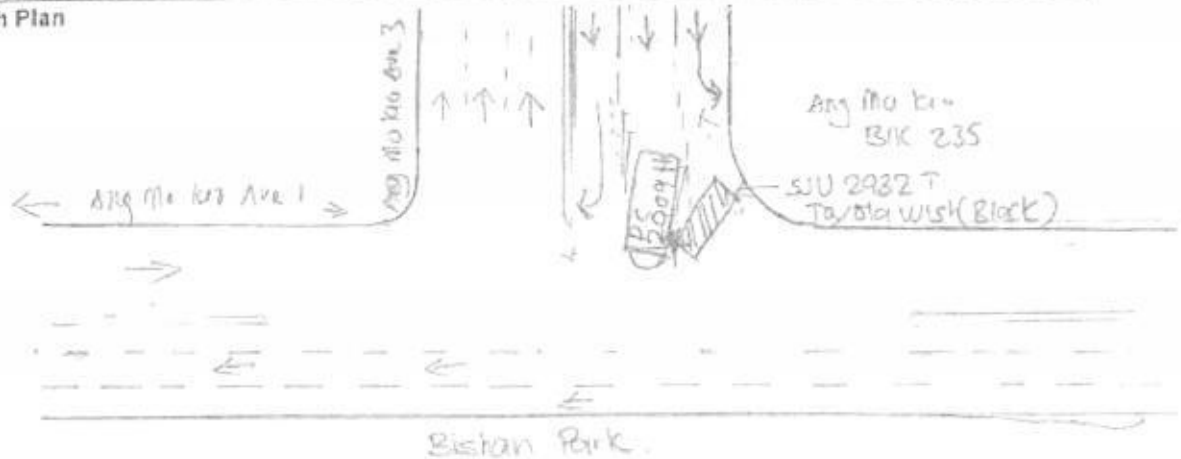
Sketch Plan #2

Note: Please note that your insurer may have 14 days Time Frame for you to submit an Own Damage Claim under your own policy. Please check your policy for more information.

() Claim Own Policy (✓) Claim TP () Claim OD/TP at other workshop () Reporting Only

Describe Circumstances of the Accident

Sketch Plan



Insurance: NRIC
Vehicle No: PG 3009H
Date: 21/6/16 14:30 @ Junction of Ang Mo Kio Ave 3 & Ang Mo Kio Ave 1

1. I Mr N. Sundarasegaram, NIC no S0176132, drive my Excursion Bus, Hi-Seater, Toyota Hi-Raft down Ang Mo Kio Ave 3 towards Ave 1 Junction. I was heading towards Ave 1 to make a right turn toward Thompson Road to go to Kringji Loop to fetch my regular trip, works to return from work. The were 3 lane. Extreme left lane we is marked to turn left the middle and lane 1 are marked to turn right at junction.
2. A Toyota wish, Black, Wh no SUJ 2932 T was moving to vehicle the junction on my left. As I reached the junction and turning right, this Toyota wish sudden, swerved to my lane and hit my left side. But he was almost about to turn left but suddenly changed he drive plan and decided to move onto our right turning lane.
3. I honked at him but he didn't control his vehicle well and this accident occurred. We both pulled to the side and he admitted his mistake. I told him I will proceed with my workshop and will do the necessary. He agreed to pay for the damages. Upon workshop inspection, I informed Mr. Jalaludin that the cost of repair and paintwork will be around \$260 to \$320 and that I will have to leave the veh for 2 days at least. I asked for a compensation for the 2 days as mine is a business. Excursion vehicle. At this point he refused to entertain me and I told him I will proceed with the insurance claim, as my average earning on a normal day is about \$350 to \$400 including my regular school and worker tip.

Declaration

(We declare the foregoing particulars are true in every respect)



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel: YS


NOTES

Mr. Jafar - Jalaludin bin Abdul Kari.
 90266545, S1071544-D.
 1530 hrs. Monday 27 Jan 2016
 Jomtien 321 off 81k 235.

I Mr. Jalaludin, acknowledge the above accident as stated
 at the above location that I have agreed to pay for the
 damages as there was no serious injuries to anyone. We will
 settle amongst ourselves.


 Jalaludin

27/Jan/16


 Mr. Rukun
 27/Jan/16

CU 28327

Tyler J. B. K.

S K AUTO CONSULTANTS

Page No. 3

Our Reference TP/016/0249SK

Vehicle No. PC 2009H

QTY	DESCRIPTION	CONDITION	REPAIRER'S ESTIMATE(\$\$)		OUR ASSESSMENT(\$\$)	
<u>PARTS (LIST ITEMS)</u>						
1	LHF Corner panel	Distorted	428.00		428.00	
1	LHF Headlamp	Damaged	742.00		742.00	
1	LHF Side view mirror assembly	Damaged	654.00		654.00	
1	LHF Door	Repair/Labour	1442.00		0.00	
1	LHF Shock Absorber	Damaged	425.90		425.90	
1	LHF Knuckle Arm	Damaged	588.00		588.00	
1	LHF Wheel Hub with Bearings	Damaged	549.70		549.70	
1	LHF Lower Arm	Damaged	673.60		673.60	
1	LHF Lower Ball Joint	Damaged	215.80		215.80	
1	LH Sliding Door	Distorted	1680.00		1680.00	
1	LH Sliding Door Trim Board	Re-use	1267.00		0.00	
8	LH Sliding Door Trim Board Clips @ \$3.20	Necessary	25.60		25.60	
1	LH Sliding Door Front Sensor Strip	Necessary	1055.10		1055.10	
1	LH Sliding Door Rear Lock	Re-use	947.80		0.00	
1	LH Sliding Door Slide Lock	Damaged	226.60		226.60	
1	LH Sliding Door Slide Lock Motor	Damaged	673.60		673.60	
1	LH Sliding Door Slide Lower Lock	Damaged	187.80		187.80	
1	LH Sliding Door Weatherstrip	Deformed	307.10		307.10	
1	LH Sliding Door Lower Weatherstrip	Deformed	48.00		48.00	
1	LH Sliding Door Stopper Sub	Necessary	10.30		10.30	
1	LH Sliding Door Stopper Slide	Necessary	29.90		29.90	
1	LH Sliding Door Inner Control Lock	Re-use	449.50		0.00	
1	LH Sliding Door Inner Control Unit	Re-use	224.80		0.00	
1	LH Sliding Door Centre Roller	Damaged	147.90		147.90	
1	LH Sliding Door Lower Roller	Damaged	332.70		332.70	
1	LHR Side Body Panel	Distorted	2450.00		2450.00	
1	LHR Wheel Hub with Bearings	Re-use	422.00		0.00	
1	LHR Shock Absorber	Re-use	372.00		0.00	
			less	25%	25%	
<u>SPECIAL NETT ITEMS</u>						
1	LH Sliding Door glass sealant	Necessary	100.00		60.00	
1	LHR side body panel glass sealant	Necessary	120.00		100.00	
1	LHR side body panel inner seal	Necessary	100.00		80.00	
1	LHF Tyre rim	Grazed	480.00		480.00	
1	LHR Tyre rim	Grazed	350.00		350.00	
1	LH sliding door - EXCURSION BUS sticker	Necessary	70.00		50.00	
1	LH Sliding door - AUTO DOOR sticker	Necessary	40.00		30.00	
			TOTAL PARTS		13692.53	
					9738.70	

S K AUTO CONSULTANTS

Page No. 4

Our Reference TP/016/0249SK
Vehicle No. PC 2009H

S/N	DESCRIPTION	REPAIRER'S ESTIMATE (\$\$)	OUR ASSESSMENT (\$\$)
1	LABOUR To remove the affected parts & fittings to commence repairs; panel beat & reshape the affected areas and replace the damaged parts and components.	1800.00	⁴⁰⁰ 1600.00
2	To supply paint materials, expandable items & putty, respray paint on parts replaced and <u>repaired areas</u>	1600.00	⁵⁰⁰ 1400.00
3	To remove, refix wiring system at accident damaged areas, check for proper function & focus headlamp beam	150.00	³⁰ 120.00
4	To remove and replace/ refix sliding door fittings, and components	150.00	^{un} 120.00 ^x
5	To remove and refix sliding door glass	80.00	^{un} 60.00 ^x
6	To remove and refix LH body panel glass	140.00	^{un} 120.00 ^x
7	To conduct full computerised wheel alignment test	120.00	^{un} 100.00 ^x
8	To remove & replace front and rear undercarriage parts (suspension system)	350.00	^{un} 300.00 ^x
9	To perform anti-rust treatment on affected areas	240.00	³⁰ 210.00 ^x
Labour Total :		4630.00	4030.00
TOTAL (PARTS & LABOUR):		18322.53	13768.70

Note: (For Lump Sum Repair)

The workshop has agreed to undertake the repair on a Lump Sum Basis, and/or the use of ex stock/reconditioned parts whichever is possible (having taken into consideration to repair instead of replacements.

The final adjusted Lump Sum contract amount is S\$11,000/-


S. Kumanan
Motor Surveyor



²³²⁸
4551850 #

MKKH16078003 / K Kim Hin Auto Pte Ltd - HQ
ENTRY DATE & TIME: 28/06/2016 17:12

SINGAPORE ACCIDENT STATEMENT

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ACCIDENT STATEMENT

Date Of Report 28/06/2016 17:12
Date Of Accident 27/06/2016 15:30
Exact Location Of Accident ANG MO KIO AVENUE 3
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJU2932T
Insured/Policyholder
Name Of Registered Owner JALALUDIN BIN ABDUL KARIM
NRIC No S1071564D
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-90266545
Alternative Phone No Office-90266545

Vehicle Particulars

Manufacturer TOYOTA
Model WISH-1.8 X (A)

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

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

If No, Please state action to be taken REPORTING ONLY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 15-MY006079-R02
Cover Note Number

Driver

Name of Driver JALALUDIN BIN ABDUL KARIM
NRIC No S1071564D
Date Of Birth 03/12/1948
Occupation INDOOR
Date Of Driving Pass 08/10/1975
Driving Experience 40 YEARS AND 8 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-90266545

Fax Number
Contact Number OFFICE-90266545
EMail Address NOEMAIL
Address BLK 121B EDGEDALE PLAIN #03-189
Postcode
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
-
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION- CHANGE/CROSS LANE
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? YES
Was there any video captured by Car Camera? 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

PLEASE REFFER TO SKETCH PLAN.

Are accident photos available for attachment? YES

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number PC2009
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver SUNDARASEGARAN
NRIC/Passport Number
Contact Number 9739 9153
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

Sketch Plan

SKETCH PLANIMPORTANT 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 Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my 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
 28/6/16
 Sketch Plan

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

Witnessed by Reporting Centre Personnel

ANG HUI CHIAO



A: SJH 29827
 B: PG 2009

Describe Circumstances of the Accident

While driving along Ave 3 and the new approaching junction of Ave 1, my vehicle (2014 2012.7) was on the 2nd lane wanted to filter to the 2nd lane with the intention of turning right into Ave 1, when the vehicle (16/2009) came speeding on my right. I tried to avoid him by swerving to my left, but due to his speed my right view mirror hit this front left side, causing for very slight dent and minor scratch. Whereas my rear view mirror slightly scratched and minor crack at the edge.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



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				
M NEDUMARAN & CO*			Ref : CS/LAW17023016/T1vbe2	
No. 11 SIN MING ROAD #B2-09 (UNIT 2), THOMSON V TWO SINGAPORE 575629			Date : 28-12-2017	
			Code : L134	
1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)				
Insured Veh.	SJU 2932T	Veh. Inspected	PC 2009H	
Policy No.	PCS.CCC.2017.213930.TM	Coverage (\$)	0.00	
Claim No.	MN/IG/E2/1611043	Excess (\$)	0.00	
Assign From	IGENE LIM	Assign Date	30/11/2017	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA HIACE HIROOF	c.c	2982	
Engine No.	HIDDEN	Year of Reg.	2013	
Chassis No.	JTFST22P600017012	Colour	WHITE	
Odometer	-	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195 R15	YOKOHAMA	5 mm	
L/H Front Tyre	195 R15	YOKOHAMA	5 mm	
R/H Rear Tyre	195 R15	YOKOHAMA	5 mm	
L/H Rear Tyre	195 R15	YOKOHAMA	5 mm	
4. Description of Damages				
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS.				
REPAIR CONDITION SEE DETAILS.				
5. General Information				
Accident Date	27/06/2016	Inspection Date	06/12/2017	
Survey held at	38 WOODLANDS IND PARK E1 #05-13			
Repairer	EMERSON AUTOMOTIVE SERVICES PTE LTD			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		4 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. PC 2009H

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	LHF CORNER PANEL	REPLACED	428.00	428.00
1	LHF HEADLAMP	REPLACED	742.00	742.00
1	LHF SIDE VIEW MIRROR ASSEMBLY	REPLACED	654.00	654.00
1	LHF DOOR	REPAIRED SEE LABOUR	1,442.00	-
1	LHF SHOCK ABSORBER	NOT NECESSARY	425.90	-
1	LHF KNUCKLE ARM	NOT NECESSARY	588.00	-
1	LHF WHEEL HUB WITH BEARINGS	NOT NECESSARY	549.70	-
1	LHF LOWER ARM	NOT NECESSARY	673.60	-
1	LHF LOWER BALL JOINT	NOT NECESSARY	215.80	-
1	LH SLIDING DOOR (DISTORTED)	NOT CONSISTENT WITH THE IMPACT	1,680.00	-
1	LH SLIDING DOOR TRIM BOARD	NOT NECESSARY	1,267.00	-
8	LH SLIDING DOOR TRIM BOARD CLIPS @\$3.20 (NECESSARY)	NOT CONSISTENT WITH THE IMPACT	25.60	-
1	LH SLIDING DOOR FRONT SENSOR STRIP (NECESSARY)	NOT CONSISTENT WITH THE IMPACT	1,055.10	-
1	LH SLIDING DOOR REAR LOCK	NOT NECESSARY	947.80	-
1	LH SLIDING DOOR SLIDE LOCK (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	226.60	-
1	LH SLIDING DOOR SLIDE LOCK MOTOR (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	673.60	-
1	LH SLIDING DOOR SLIDE LOWER LOCK (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	187.80	-
1	LH SLIDING DOOR WEATHERSTRIP (DEFORMED)	NOT CONSISTENT WITH THE IMPACT	307.10	-
1	LH SLIDING DOOR LOWER WEATHERSTRIP (DEFORMED)	NOT CONSISTENT WITH THE IMPACT	48.00	-
1	LH SLIDING DOOR STOPPER SUB (NECESSARY)	NOT CONSISTENT WITH THE IMPACT	10.30	-
1	LH SLIDING DOOR STOPPER SLIDE (NECESSARY)	NOT CONSISTENT WITH THE IMPACT	29.90	-
1	LH SLIDING DOOR INNER CONTROL LOCK	NOT NECESSARY	449.50	-
1	LH SLIDING DOOR INNER CONTROL UNIT	NOT NECESSARY	224.80	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	LH SLIDING DOOR CENTRE ROLLER (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	147.90	-
1	LH SLIDING DOOR LOWER ROLLER (DAMAGED)	NOT CONSISTENT WITH THE IMPACT	332.70	-
1	LHR SIDE BODY PANEL (DISTORTED)	NOT CONSISTENT WITH THE IMPACT	2,450.00	-
1	LHR WHEEL HUB WITH BEARINGS	NOT NECESSARY	422.00	-
1	LHR SHOCK ABSORBER	NOT NECESSARY	372.00	-
	LESS 25% DISCOUNT		-4,144.18	-456.00
			12,432.52	1,368.00
	<u>SPECIAL NETT ITEMS</u>			
1	LH SLIDING DOOR GLASS SEALANT (SN)	NOT NECESSARY	100.00	-
1	LHR SIDE BODY PANEL GLASS SEALANT (SN)	NOT NECESSARY	120.00	-
1	LHR SIDE BODY PANEL INNER SEAL (SN)	NOT NECESSARY	100.00	-
1	LHF TYRE RIM (SN)	NOT NECESSARY	480.00	-
1	LHR TYRE RIM (SN)	NOT NECESSARY	350.00	-
1	LH SLIDING DOOR - EXCURSION BUS STICKER (SN)	NOT NECESSARY	70.00	-
1	LH SLIDING DOOR - AUTO DOOR STICKER (SN)	NOT NECESSARY	40.00	-
			1,260.00	-
	<u>LABOUR</u>			
	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; PANEL BEAT & RESHAPE THE AFFECTED AREAS AND REPLACE THE DAMAGED PARTS AND COMPONENTS. INCLUSIVE OF THE REPAIR OF LHF DOOR.		1,800.00	400.00
	TO SUPPLY PAINT MATERIALS, EXPANDABLE ITEMS & PUTTY, RESPRAY PAINT ON PARTS REPLACED AND REPAIRED AREAS.		1,600.00	500.00
	TO REMOVE, REFIX WIRING SYSTEM AT ACCIDENT DAMAGED AREAS, CHECK FOR PROPER FUNCTION & FOCUS HEADLAMP BEAM.		150.00	30.00
	TO REMOVE AND REPLACE / REFIX SLIDING DOOR FITTINGS, AND COMPONENTS.	NOT NECESSARY	150.00	-
	TO REMOVE AND REFIX SLIDING DOOR GLASS.	NOT NECESSARY	80.00	-
	TO REMOVE AND REFIX LH BODY PANEL GLASS.	NOT NECESSARY	140.00	-
	TO CONDUCT FULL COMPUTERISED WHEEL ALIGNMENT TEST.	NOT NECESSARY	120.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE & REPLACE FRONT AND REAR UNDERCARRIAGE PARTS (SUSPENSION SYSTEM)	NOT NECESSARY	350.00	-
	TO PERFORM ANTI-RUST TREATMENT ON AFFECTED AREAS.		240.00	30.00
			4,630.00	960.00
GRAND TOTAL			18,322.52	2,328.00
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,850.00

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MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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