

ASS. REC. BY:

REF:

TP /

CS/TP 1702329/Krbnz

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop n/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 03 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time Action / Instruction

7/12 file parts to Catherine

L1 Rep 81850

SHD 96140 - NBA / TNC / 170087007

Confirm LIS 81850, 3 days

Red: \$ 8855.60, 83%

RECEIVED 07-2011

Veh No: SHD 96140 Yr Regn: OF, 12

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

Truck / Trailer or

Make: Chevrolet Epica c.c. 1991Colour: White / Red A/C: Insured / Std / NI / NASp. Reading: 760443 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KL11A69RJB 098749Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15

R: _____

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

TOYO / YOKO or Giti

Front

Rear

R/Bal. 7 mm R/Bal. 8 mmL/Bal. 7 mm L/Bal. 8 mmD.O.A. 4/12/17 D.O.I. 6/12/17Survey held at ✓

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

The veh found damaged at the RT intersection.

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

The RT door, RT wing arm & RT bonnet. The cause of damage due to vandalism.

D.O. 031517

Date/Time, File Pass to?

☐ : Prel. Report1) typist☒ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 3Resurvey No. of Trip: -Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech Invs (\$)☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format: TPLump Sum / L.B.I. (\$) 185

170
30
20
80
320




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				
TRANS-CAB AUTO SERVICES PTE LTD		Ref : CS/TP17023229/Krb		
NO.2 ANG MO KIO STREET 63 SINGAPORE 569111		Date : 07-12-2017		
		Code : TP378		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	Veh. Inspected		SHD 9614D	
Policy No.	Coverage (\$)		0.00	
Claim No.	Excess (\$)		0.00	
Assign From	Assign Date		06/12/2017	
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	04/12/2017	Inspection Date	06/12/2017	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type	Company
Owner ID	3878K
Vehicle Details	
Vehicle No.	SHD9614D
Vehicle to be Exported	Yes
Intended De-registration Date	05 Dec 2017
Vehicle Make	CHEVROLET
Vehicle Model	EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO
Primary Colour	Red
Manufacturing Year	2011
Engine No.	Z20S1455871K
Chassis No.	KL1LA69RJBB098749
Maximum Power Output	110.0 kW (147 bhp)
Open Market Value	\$14,384.00
Original Registration Date	27 Jul 2012
First Registration Date	27 Jul 2012
Transfer Count	0
Actual ARF Paid	\$14,384.00
Intended PARF Rebate Details	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	26 Jul 2020
PARF Rebate Amount	\$10,068.00
Intended COE Rebate Details	
COE Expiry Date	26 Jul 2020
COE Category	A - Car (1600cc & below)
COE Period(Years)	8
QP Paid	\$47,203.00
COE Rebate Amount	\$15,575.00
Total Rebate Amount	\$25,643.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon	

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 willful 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	05/12/2017 11:00
Date Of Accident	04/12/2017 18:00
Exact Location Of Accident	142 LORONG AH SOO CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHD9614D
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666
Vehicle Particulars	
Manufacturer	CHEVROLET
Model	EPICA-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	
Driver	
Name of Driver	CHAN KUM WENG
NRIC No	S1647517C
Date Of Birth	01/05/1964
Occupation	OUTDOOR
Date Of Driving Pass	26/04/1988
Driving Experience	29 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90264718
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 667 HOUGANG AVENUE 4 #09-331
Postcode	530667
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	DRIZZLING
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?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4890999 - FAX NO: 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : F/20171204/2204

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY5140G
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)	

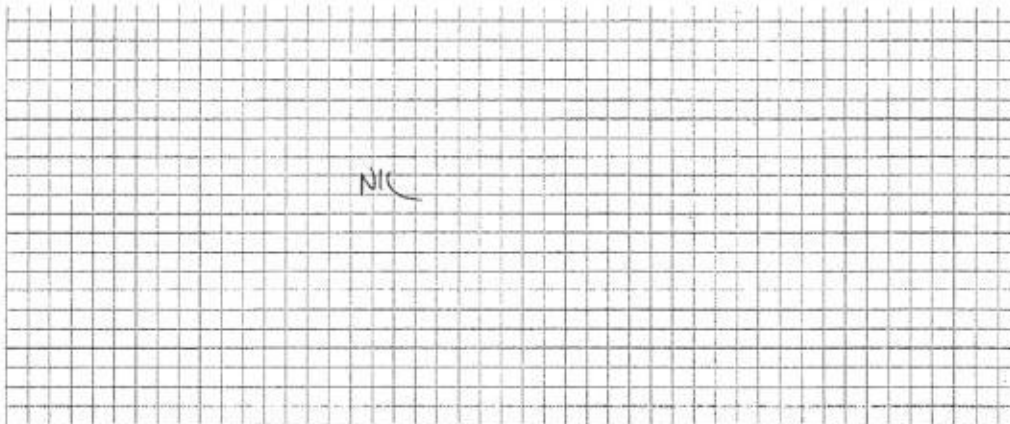
Details of Witness

Name

Phone Number

Email Address

Sketch Plan #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach police report

DECLARATION

I/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:

[Signature]
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 1

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 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 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:
 - (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.
- (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:
 - (i) 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
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



F/20171204/2204

1 of 2

POLICE REPORT (NP299)

Report No. F/20171204/2204

Police Station Of Origin
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Date/Time Report Made 04/12/2017 20:09	Vide Report No. F/20171204/0213	Station Diary No. 145
Name Of Informant CHAN KUM WENG	Address APT BLK 667 HOUGANG AVENUE 4 #09-331 SINGAPORE 530667	
ID Type / ID No. NRIC NO / S1647517C	Contact No. Home/Office Mobile 90264718	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Taxi driver	Sex Male	Age 53
	Date of Birth 01/05/1964	Race Chinese
Institution/School Name	Language	
Date/Time Of Incident 04/12/2017 18:00	Location Of Incident 142 LORONG AH SOO HDB-HOUGANG SINGAPORE 530142	

Brief details.

On 04/12/2017 at about 1800hrs, I was driving my taxi SHD9614D in the open car park of Blk 142 Lor Ah Soo. Everything was in order, nothing was amiss.
Suddenly, I heard a loud honk from the rear. It was from another vehicle GY5140G. A man in his 50-60s then alighted from GY5140G, walked to my vehicle and shouted at me saying, "Is it my fault" repeatedly. I was not aware of what has happened or what could have caused his anger. I then warned him that I would have to call for police assistance. After which, he kicked my front passenger seat door, hit onto the

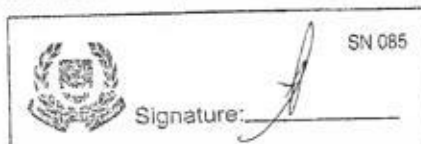
Signature Of Officer Recording The Report:

F / Sgt 2 ASHLEY TOH

Signature Of Interpreter:
Not applicable

Officer in-Charge Of Case:
F / Hougang N.P.C /
SI GOH JA SEN
Contact No.: 64890999

Authentication Stamp



Signature Of Informant:

Date/Time:
04/12/2017 20:09

Classification Of Case:

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



F/20171204/2204

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20171204/2204

window and bonnet with his hand and pulled out both my vehicle's wipers. Subsequently, police assistance was called reference F/20171204/0213. I was then advised to lodge a police report as I wish to pursue the matter.

I wish to state that I did not alight from my vehicle SHD9614D as the driver of GY5140G was very aggressive.

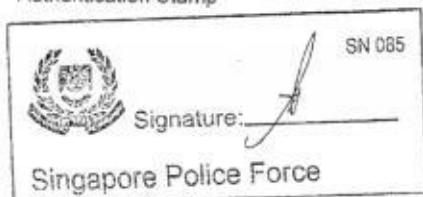
Signature Of Officer Recording The Report:

F / Sgt 2 ASHLEY TOH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Hougang N.P.C /
SI GOH JA SEN
Contact No.: 64890999

Authentication Stamp



Signature Of Informant:

Date/Time:
04/12/2017 20:09

Classification Of Case:

TRANS-CAB AUTO SERVICES PTE LTD

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHD9184C -**AAD1712-053***Not Authorized
L1 Sing & 1850k*

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

SHD9614D - CANDY

KL1LA69RJB098749

CHEVROLET

EPICA 2.0

04.12.2017

		PART	LIST
1	1	Front Door <i>RH</i>	\$ <i>11</i> 1,133.00 X
2	1	Front Door <i>RH</i> Window Glass	\$ <i>Sm</i> 456.12 X
3	1	Front wiper blade 20"	\$ <i>hit Bo</i> 21.50 ✓
4	1	Front wiper blade 22"	\$ <i>hit Bo</i> 26.90 ✓
5	1	Front Wiper Motor	\$ <i>Sm</i> 180.55 X
6	1	Front Wiper Arm RH	\$ <i>Bo</i> 37.66 ✓
7	1	Front Wiper Arm LH	\$ <i>Bo</i> 35.65 ✓
8	1	Front Wiper Linkage	\$ <i>Sm</i> 126.55 X
9	1	Front Wiper Garnish Weatherstrip	\$ <i>Sm</i> 85.70 X
10	1	Front wiper arm cover	\$ <i>Sm</i> 2.50 X
11	1	Front Wiper Garnish / Wiper Grille (Cowl A)	\$ <i>Ext</i> 184.50 ✓
12	1	Front Wiper Side Garnish RH (Extension-Cowl RH)	\$ <i>Sm</i> 8.50 X
13	1	Front Wiper Side Garnish LH (Extension-Cowl LH)	\$ <i>Sm</i> 8.50 X
14	1	Front Windscreen	\$ <i>hit</i> 1,304.00 ✓
15	1	Front Windscreen Moulding	\$ <i>Sm</i> 196.00 ✓
16	1	Bonnet Panel	\$ <i>11</i> 1,250.00 X

TOTAL	\$	5,057.63
10%	\$	505.76
	\$	4,551.87

Special Nett

1	1	Front windscreen sealant	\$ <i>11</i> 80.00 <i>405m</i>
2	1	Front Wiper Blade RH	\$ <i>hit</i> 16.60 X
3	1	Front Wiper Blade LH	\$ <i>11</i> 16.63 X
4	1	Front Wiper Arm Cap	\$ <i>11</i> 2.50 X
5	1 Set	Front Wiper Garnish Clip	\$ <i>11</i> 18.00 ✓
6	1 Set	Front Wiper Side Garnish Clip RH	\$ <i>11</i> 5.00 X
7	1 Set	Front Wiper Side Garnish Clip LH	\$ <i>11</i> 5.00 X

TRANS-CAB AUTO SERVICES PTE LTD**AAD1712-053**

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHD9184C -

TOTAL	\$	143.73
TOTAL PARTS	\$	4,695.60

Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	2,700.00	2000
To Check Electrical Lighting Concerned.	\$	170.00	100
To Rust-Proofing Of The Affected Areas.	\$	170.00	200 X
Putty And Spray Painting Of The Affected Portion.	\$	2,800.00	4000
To transfer of Fender fittings, attachments and perform water seepage test.	\$	170.00	200 X

	\$	6,010.00
TOTAL	\$	10,705.60

Repair Days**10 Days***3 day*

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:



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

TRANS-CAB AUTO SERVICES PTE LTD

Ref : CS/TP17023229/Krbn2

NO.2 ANG MO KIO STREET 63 SINGAPORE 569111

Date : 14-12-2017



Code : TP378

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	SHD 9614D
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	06/12/2017

2. Vehicle Particulars & Condition

Make & Model	CHEVROLET EPICA (A)	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KL1LA69RJBB098749	Colour	WHITE / RED
Odometer	760443	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	GITI	7 mm
L/H Front Tyre	195/65 R15	GITI	7 mm
R/H Rear Tyre	195/65 R15	GITI	8 mm
L/H Rear Tyre	195/65 R15	GITI	8 mm

4. Description of Damages

THE VEHICLE FOUND DAMAGED AT THE FRT WINDSCREEN, FRT RH DOOR, FRT WIPER ARM & FRT BONNET. THE CAUSE OF DAMAGED DUE TO VANDALISM. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	04/12/2017	Inspection Date	06/12/2017
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 9614D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT DOOR RH	TO REPAIR SEE LABOUR	1,133.00	-
1	FRONT DOOR RH WINDOW GLASS	SERVICEABLE	456.12	-
1	FRONT WIPER BLADE 20	MISSING	21.50	21.50
1	FRONT WIPER BLADE 22	MISSING	26.90	26.90
1	FRONT WIPER MOTOR	SERVICEABLE	180.55	-
1	FRONT WIPER ARM RH	BROKEN	37.66	37.66
1	FRONT WIPER ARM LH	BROKEN	35.65	35.65
1	FRONT WIPER LINKAGE	SERVICEABLE	126.55	-
1	FRONT WIPER GARNISH WEATHERSTRIP	SERVICEABLE	85.70	-
1	FRONT WIPER ARM COVER	SERVICEABLE	2.50	-
1	FRONT WIPER GARNISH/WIPER GRILLE (COWL A)	CUT	184.50	184.50
1	FRONT WIPER SIDE GARNISH RH (EXTENSION-COWL RH)	SERVICEABLE	8.50	-
1	FRONT WIPER SIDE GARNISH LH (EXTENSION-COWL LH)	SERVICEABLE	8.50	-
1	FRONT WINDSCREEN	CUT	1,304.00	1,304.00
1	FRONT WINDSCREEN MOULDING	NECESSARY	196.00	196.00
1	BONNET PANEL	TO REPAIR SEE LABOUR	1,250.00	-
	LESS 10% DISCOUNT		-505.76	-180.62
			4,551.87	1,625.59
<u>SPECIAL NETT ITEMS</u>				
1	FRONT WINDSCREEN SEALANT (SN)	NECESSARY	80.00	40.00
1	FRONT WIPER BLADE RH (SN)	REPEATED	16.60	-
1	FRONT WIPER BLADE LH (SN)	REPEATED	16.63	-
1	FRONT WIPER ARM CAP (SN)	REPEATED	2.50	-
1	SET FRONT WIPER GARNISH CLIP (SN)	NECESSARY	18.00	18.00
1	SET FRONT WIPER SIDE GARNISH CLIP RH (SN)	NOT NECESSARY	5.00	-
1	SET FRONT WIPER SIDE GARNISH CLIP LH (SN)	NOT NECESSARY	5.00	-
			143.73	58.00



LKK Auto Consultants Pte Ltd

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TEL: 6256 3561 FAX: 6256 4315

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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LABOUR			
	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF FRONT DOOR RH AND BONNET PANEL.		2,700.00	200.00
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	10.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.	NOT NECESSARY	170.00	-
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		2,800.00	400.00
	TO TRANSFER OF FENDER FITTINGS,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
			6,010.00	610.00
	GRAND TOTAL		10,705.60	2,293.59
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			1,850.00

Report Ref No. CS/TP17023229/Krbn2

KONG SENG CHEONG

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.



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

TRANS-CAB AUTO SERVICES PTE LTD

Ref : CS/TP17023229/Krbn2

NO.2 ANG MO KIO STREET 63 SINGAPORE 569111

Date : 14-12-2017



Code : TP378

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	Veh. Inspected	SHD 9614D
Policy No.	Coverage (\$)	0.00
Claim No.	Excess (\$)	0.00
Assign From	Assign Date	06/12/2017

2. Vehicle Particulars & Condition

Make & Model	CHEVROLET EPICA (A)	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KL1LA69RJBB098749	Colour	WHITE / RED
Odometer	760443	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	GITI	7 mm
L/H Front Tyre	195/65 R15	GITI	7 mm
R/H Rear Tyre	195/65 R15	GITI	8 mm
L/H Rear Tyre	195/65 R15	GITI	8 mm

4. Description of Damages

THE VEHICLE FOUND DAMAGED AT THE FRT WINDSCREEN, FRT RH DOOR, FRT WIPER ARM & FRT BONNET. THE CAUSE OF DAMAGED DUE TO VANDALISM.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	04/12/2017	Inspection Date	06/12/2017
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 Working Days
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TAX INVOICE

TRANS-CAB AUTO SERVICES PTE LTD
NO.2 ANG MO KIO STREET 63
SINGAPORE 569111

INV No. AC1714213
INV Date 14/12/2017
Reference CS/TP17023229/Krbn2
Code TP378



PROFESSIONAL SERVICE FEE

Vehicle No. SHD 9614D

Insured Veh.

Claim No.

Policy No.

Accident Date 04/12/2017

Inspection Date 06/12/2017

Description	Total
Survey Inspection	320.00
Digital Photographs	
Transportation	
Subtotal	320.00
GST (7%)	22.40
Grand Total	342.40

We shall be glad if you could forward the payment at your early convenience.

Cheque should be crossed and made payable to 'LKK Auto Consultants Pte Ltd'

LKK Auto Consultants Pte Ltd

HYN



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Insured Veh.

Claim No.

Policy No.

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