

ASS. REC. BY:

REF: CS/ASM17023799/Ribber

Special Instruction:

Surveyor:

Smart claim

ASSIGNMENT (Office)

From (Person):

Vale Oh

of

AXA

Date/Time:

13/12/17 8:02am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FV 4606P

Insured:

SN 8765H

at Workshop m/s

St 98 motor

Tel:

6452 4898

of

Blk 4001 Amik Ind Park 1 #01-21

Policy No:

Claim No:

STM0053V

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 13/12/2017

CA / REV / REP. / REV 24 HRS WP

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	FV 4606P - X
	SN 8765H - X
18/12/17 @ 1.57pm	Informed Vale, we are pending estimate from repairer.
	Ramul finalised LS @ 2950, 4 days.
	(Red @ 2715.00, 48%)
24/8/18 @ 4.57pm	revised to Vale via Smart Claim.

Kan

0053A

0053A/24: 2022/APR

ASSIGNMENT

From _____ Date _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / M /

To inspect Vehicle No. _____

at Workshop this _____

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.

Bal. or Market Value _____

IDAC Accident Report _____ Consistent? Yes or No

GIA / PR Seen _____ Consistent? Yes or No

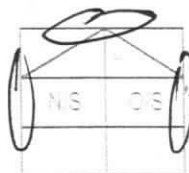
Est. Repairs: 4 days Res: Yes or No

Lum Sum: _____ % B Val: Yes or No

CA / REV / REP. / 24 HRS

Date _____ Person Contacted _____

Vehicle IN / OUT



Ref No. FV 4606P Reg 2002 Aug 1

Type M/Car / Bus / Van / Lorry / Taxi / Prime/Mover

Truck / Trailer or

Make KANASAKI KRR ZX150 148

Colour Yellow A/C Insured Std / No / NA

So Reading 41790 F/Paid Insured Std / No / NA

Eng No _____

C No KR150KA 55675

Gen. Cond Good / Poor / Burnt

Steering Order / Jammed / Leaked / Burnt or

Brake Order / Jammed / Leaked / Burnt or

Mod: Nil / S/R / STD A/Rim or

Tyre Size F: 90/80-17

R: 100/80-17

BS / EXNOVA / GY / FS / LIZA / MIO / OHTSU / PIR / SUMI

TOYO / YOKO or

Front _____ Rear _____

R/Bal 3 mm R/Bal 3 mm

L/Bal _____ mm L/Bal _____ mm

D.O.A. 03/12/17 D.O.L. 13/12/17

Survey held at SG 98 motor

Des. of Damages Front / Rear / MS / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

RECEIVED 24 AUG 2018

[Signature]

23/8/2018

Date/Time File Passed: ☐ Prelim. Report

24/8/2018 ☐ Final Report

Date/Time File Returned: _____

Days Of Repair: 4

Resurvey No. of Trip _____

Surveys Fee

Transportation

Subsistence

Other

Total

Remarks

Signature

Date

Add Fee:

Stained _____

Washed _____

Tested _____

Repaired _____

Report Format:

Lum Sum: 2950

Smart Claims



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

AXA INSURANCE PTE LTD

Ref : CS/AXA17023799/R1qb

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811

Date : 14-12-2017



Code : AXA2

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLN 8765H	Veh. Inspected	FV 4606P
Policy No.		Coverage (\$)	0.00
Claim No.	S7M0053V	Excess (\$)	0.00
Assign From	SMART CLAIM (VALE OH)	Assign Date	13/12/2017

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	03/12/2017	Inspection Date	14/12/2017
Survey held at	SG 98 MOTOR PTE LTD BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21 SINGAPORE 569622		

5a. Remarks

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




Service Request Details

Claim

S7M0053V

Reference

None 

Loss Date

December 3, 2017

Request Date

December 13, 2017

Due Date

March 30, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Standard workshop survey

Actions

Next Step

Finish the work

Complete Work

More ▾

Vehicle Information

Incident Vehicle Registration #

FV4606P

Make

TPVD KAWASAKI

Service Address

BLK 1 TANJONG RHU ROAD, , , 436879

Primary Contact/Insured

INDER BHALLA DEV

BLK 1 TANJONG RHU ROAD, #06-03, 436879, Singapore, Singapore

96691915

DEV@INDIASEMEDIA.COM

Claim Handler

Vale OH

6568804897

vale.oh@axa.com.sg

Additional Instructions

PLS BE STRINGENT TOWARDS COR

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 24/08/18

Survey Details:

Date of loss	3-Dec-17
Date of appointment	13-Dec-17
Date of survey	13-Dec-17
Location of survey	SG 98 MOTOR

Vehicle Details:

Claim Type:	Third Party
Vehicle number	FV 4606P
Make and Model	KAWASAKI KRR ZX150
Date of registration	1/8/2002
Excess	\$ -
Market Value	\$ -
Parf Rebate	\$ -
Nett Loss	\$ -

Repair details:

Initial Estimate	\$ 5,665.20
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 3,033.00
Check items (estimate)	\$ -
Labour	\$ 665.00
Total	\$ 3,698.00
Lump Sum(if applicable)	\$ 2,950.00

Number of days for repair	<u>4</u>
---------------------------	----------



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

DAMAGES CONSISTENT.

Mandate:

Liability(TP)	%	
Proposed repair cost	\$	
Loss of use	\$	no. of days
Loss of rental	\$	no. of days
Loss of income	\$	no. of days
LTA search fees	\$	
Others	\$	
Proposed Total	#VALUE!	

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	07/12/2017 10:52
Date Of Accident	03/12/2017 20:45
Exact Location Of Accident	STADIUM BOULEVARD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FV4606P
Insured/Policyholder	
Name Of Registered Owner	SYED MUSA BIN SYED HUSSIN
NRIC No	S9220053A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98634000
Alternative Phone No	OTHERS-98634000

Vehicle Particulars

Manufacturer	KAWASAKI
Model	KRRZX150
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5081652703-01
Cover Note Number	

Driver

Name of Driver	SYED MUSA BIN SYED HUSSIN
NRIC No	S9220053A
Date Of Birth	19/05/1992
Occupation	OUTDOOR
Date Of Driving Pass	05/02/2014
Driving Experience	3 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98634000
Fax Number	
Contact Number	OTHERS 98634000

Address	BLK 134 BEDOK NORTH STREET 2 #08-103
Postcode	460134
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLN8765H
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

Sketch Plan Pg. 1


SKETCH PLAN


IMPORTANT NOTICE

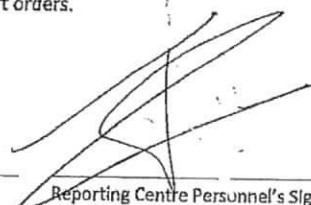
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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:

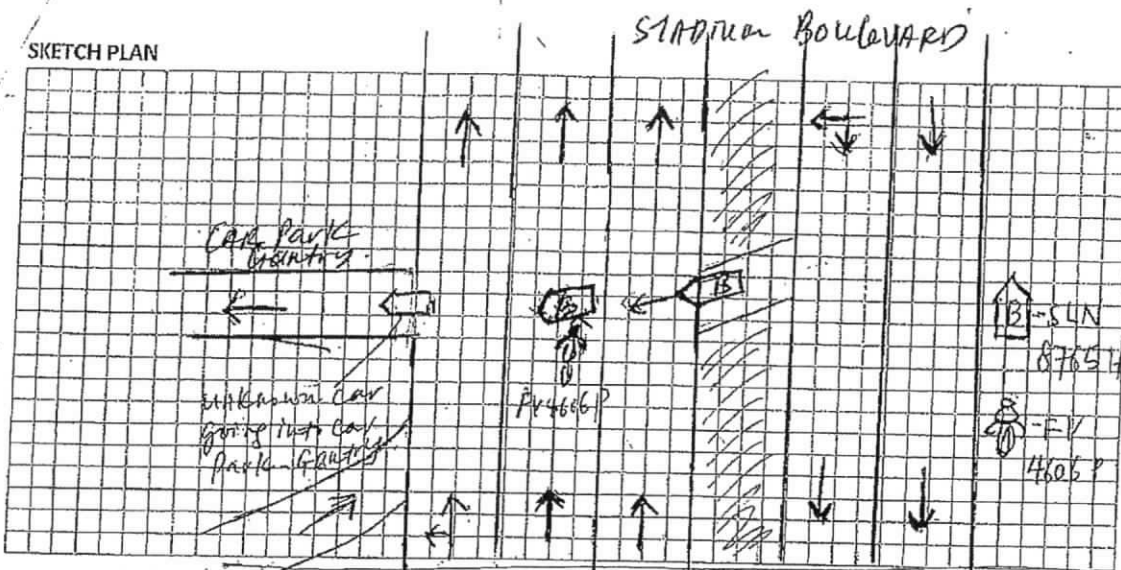
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Mount Batten Road

Refer to police report no: 7/20171205/2094

DECLARATION

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

A

Policyholder's Signature
Date & Time:

A

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

[Signature]

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



**SINGAPORE
POLICE FORCE**



T/20171205/2094

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20171205/2094

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/12/2017 15:25		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: syed musa bin syed hussin			Address: APT BLK 134 BEDOK NTH ST 2 #08-103 HDB-BEDOK SINGAPORE 460134		
ID Type / ID No.: NRIC NO / S9220053A			Contact No.: Home/Office: Mobile: 98634000		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 25	Date of Birth: 19/05/1992	Type of Informant: Rider		
Race: Malay		Language: English		Institution / School Name:	
Occupation: DELIVERY RIDER			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 03/12/2017 20:45	Type of Location: Straight Road
Location: Along Road 1 STADIUM BOULEVARD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FV4606P	Motorcycle	KAWASAKI	KRRZX150	Silver	Seriously Damaged	0
SLN8765H	Car	MERCEDES BENZ	E 200CGI	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FV4606P	NTUC Income Insurance Co-Operative Limited	5081652703-01	01/09/2017	31/08/2018



**SINGAPORE
POLICE FORCE**



T/20171205/2094

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20171205/2094

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	syed musa bin syed hussin	ID No.	S9220053A
Related Vehicle	FV4606P (Motorcycle)	Contact No.	98634000
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	03/12/2017	Date Discharge	04/12/2017
No. of Days granted Medical Leave	05	Degree of Injury	NIL

Brief Details.

on 03/12/2017 at about 2045hrs i was travelling along stadium boulevard, when approached the junction near to the carpark entrance to the kfc, there was car which made a right turn from my opposite direction into the carpark. the car was supposed to give in for vehicles going straight from my way. however he made the right turn into the carpark but eventually never made the full turn into the lane and was in the middle of the road. as i approached the car i couldn't stop in time and tried to prevent collision by swerving by my right side by eventually i didn't have enough time even though i applied e-brakeing and had collided on the rear left hand side of the car. however the car driver had tried to flee away after the accident bu the passer-by had helped me to hold him back. the traffic police and ambulance were at scene. i was then conveyed to tan tock seng hospital.



**SINGAPORE
POLICE FORCE**



T/20171205/2094

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20171205/2094

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
TP /
BALAN S/O RAMIAH

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /

Contact No.:

Authentication Stamp
NP168

Signature Of Informant:

A

Date/Time:

05/12/2017 15:25



**SINGAPORE
POLICE FORCE**

Classification Of Case:

Signature:

[Signature]



PENDING FOR ESTIMATE FROM REPAIRER.

Type

🔗 Question

Message

Dear Vale, Please be informed that we have inspected the vehicle FV 4606P on 13/12/2017. We are pending for estimate from repairer. - Shiau Chan

Reply

Enquire Vehicle & Owner Information (Vehicle No. SJM3974H As At 01 Jan 2012 / 09:00:00)**Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: ZAMISC/12/IR

Current Owner Details

Owner ID Type: Malaysia NRIC

Owner ID: 680920106599

Owner Name: PESALAMEYYAPPAN @SUPPIAH A/L PS SOLAI

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 62

Registered Street Name: JALAN EUNOS

Registered Unit No.: -

Registered Building Name: SUPREME COMPONENTS INTNL P/L

Registered Postal Code: 419508

Current Vehicle Details

Vehicle No.: SJM3974H

Make Description/Model: SUBARU / IMPREZA 4DR 1.5R AWD 4AT ABS AIRBAG

Insurance Company Name: DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

Ms Chia

SGG 45817

Tris

Joh Law

16/1/12

Land Transport Authority

Please read through the Privacy Statement, Conditions of Use and Disclaimer.
Please do not use the Back or Forward buttons on your browser as this may alter the results of the transactions.
Best viewed with IE 6.0 SP3 and above. 800 X 600 resolution
Copyright © 2005 LTA | [Privacy Statement](#) | [Conditions of Use](#) | [Disclaimer](#)

62564315

SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 569622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

Date: 15 December 2017

To : LKK

By Fax: 6256-4315

Attn : Rasul

Tel : 90010068

VEHICLE NO : FV 4606P

Kawasaki KR 150

ACCIDENT DATE: 3 December 2017

<u>Description</u>	<u>Qty</u>	<u>Quotation \$</u>
1 Front Headlamp	1	265.00 <i>Bro /</i>
2 Headlamp Stay / Bracket	1	250.00 <i>PA /</i>
3 Front Signal Lamp	2	120.00 <i>Bro /</i>
4 Front Cowling	1	255.00 <i>CRA /</i>
5 Air Intake	<i>2 / 1 pc</i>	<i>60</i> 125.00 <i>CRA /</i>
6 Handle Bar	<i>2 / 1 pc</i>	65.00 <i>PA /</i>
7 Front Mudguard	1	<i>95</i> 165.00 <i>CRA /</i>
8 Fork Tube	1 set	480.00 <i>BT /</i>
9 Fork Bracket	1	165.00 <i>PA /</i>
10 Front Rim	1	320.00 <i>repair</i>
11 Rim Axle	1	85.00 <i>X SU</i>
12 Meter Assy	1	425.00 <i>Bro /</i>
13 Visor / Windshield	1	<i>65</i> 185.00 <i>CRA /</i>
14 Front RH Fairing	1	165.00 <i>scr /</i>
15 Front Brake Disc	1	195.00 <i>X SU</i>
16 Front RH Lower Fairing	1	165.00 <i>CRA /</i>
17 Brake Pedal	1	<i>75</i> 95.00 <i>scr BT /</i>
18 Footrest RH	1	<i>40</i> 65.00 <i>Bro /</i>
19 Footrest Bracket	1	135.00 <i>X SU</i>
20 Exhaust Pipe	1	<i>285</i> 358.00 <i>PA /</i>
21 Tail Fairing	1	135.00 <i>scr /</i>
22 Rear Signal	1	75.00 <i>scr /</i>
23 Headlamp Stay Halogan	1	265.00 <i>X SU</i>
24 Tail Cover Garnish	1	185.00 <i>scr /</i>
25 Rear Mudguard	1	135.00 <i>X 3 SU</i>
26 Tail Centre Cover	1	150.00 <i>X /</i>

Sub-Total

5,028.00

Less 10%

502.80

Sub-Total

4,525.20

*emailed
Rasul
15/12/17*

*3370
10%
3033*

VEHICLE NO : FV 4606P

Kawasaki KR 150

Nett items

- 1 Front Number Plate
- 2 Bulb
- 3 Towing fee
- 4 Remove & replace necessary parts, align & etc
- 5 Remove & replace fork tube, fork oil seal, top up oil, rim etc
- 6 Supply body decal sticker
- 7 Re-align front body frame

10
15.00 ~~new~~
15 25.00 ~~Bro~~
40.00
380.00 250
230.00 100
200.00 100
250.00 150

665

Sub-Total

1,140.00

Nett Total

5,665.20

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair commences, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion

Thank you

SG 98 MOTOR PTE LTD

LG

Rasul

Hp 90010068

4 days

h/s

13/12/17 @ 1225

3033

665

3698

2020

2958.40

h/s - 2,950

4 days

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:

Attn: Mr. Rasul
OK, Deeplove!
SG 98 MOTOR PTE LTD

4001, Ang Mo Kio Industrial Park 1 #01-21 SINGAPORE 589622

Tel: 6452 4898 Fax: 6452 4868

Email: sg_motor_enterprise@yahoo.com.sg

22/8/2018

Date: 15 December 2017

To : LKK

By Fax: 6256-4315

Attn: Rasul

Tel : 90010068

VEHICLE NO : FV 4606P

Kawasaki KR 150

ACCIDENT DATE: 3 December 2017

Description	Qty	Quotation \$
1 Front Headlamp	1	265.00 <i>Pro</i>
2 Headlamp Stay / Bracket	1	250.00 <i>Pro</i>
3 Front Signal Lamp	2	120.00 <i>Pro</i>
4 Front Cowling	1	255.00 <i>Pro</i>
5 Air Intake	2 <i>1 pc</i>	60 125.00 <i>Pro</i>
6 Handle Bar	2 <i>1 pc</i>	65 65.00 <i>Pro</i>
7 Front Mudguard	1	95 165.00 <i>Pro</i>
8 Fork Tube	1 set	480.00 <i>Pro</i>
9 Fork Bracket	1	165.00 <i>Pro</i>
10 Front Rim	1	320.00 <i>repair</i>
11 Rim Axle	1	85.00 <i>X</i>
12 Meter Assy	1	425.00 <i>Pro</i>
13 Visor / Windshield	1	65 185.00 <i>Pro</i>
14 Front RH Fairing	1	165.00 <i>Pro</i>
15 Front Brake Disc	1	195.00 <i>X</i>
16 Front RH Lower Fairing	1	165.00 <i>Pro</i>
17 Brake Pedal	1	75 95.00 <i>Pro</i>
18 Footrest RH	1	40 85.00 <i>Pro</i>
19 Footrest Bracket	1	135.00 <i>X</i>
20 Exhaust Pipe	1	285 358.00 <i>Pro</i>
21 Tail Fairing	1	135.00 <i>Pro</i>
22 Rear Signal	1	75.00 <i>Pro</i>
23 Headlamp Stay Halogan	1	265.00 <i>X</i>
24 Tail Cover Garnish	1	185.00 <i>Pro</i>
25 Rear Mudguard	1	135.00 <i>X</i>
26 Tail Centre Cover	1	150.00 <i>X</i>

Sub-Total

5,028.00

3370

Less 10%

502.80

10%

Sub-Total

4,525.20

3033

Amended
Resul
15/12/17

VEHICLE NO : FV 4606P

Kawasaki KR 150

Nett Items

- 1 Front Number Plate
- 2 Bulb
- 3 Towing fee
- 4 Remove & replace necessary parts, align & etc
- 5 Remove & replace fork tube, fork oil seal, top up oil, rim etc
- 6 Supply body decal sticker
- 7 Re-align front body frame

~~10~~
~~15.00~~ new
~~15~~ ~~25.00~~ Bro
~~40.00~~
~~380.00~~ 250
~~230.00~~ 100
~~200.00~~ 100
~~250.00~~ 150

665

Sub-Total 1,140.00

Nett Total 5,665.20

NB: This estimate was made from a visual inspection only, any other damage parts or labour require when repair commences, we will advise you and submit supplementary item to you accordingly.

Kindly revert upon completion
Thank you

SG 98 MOTOR PTE LTD

10

Resub
Hp 90010068

4 days

H/S

12/12/17 @ 1225

OK

Accum

3033

665

3698

202

2958140

H/S - 2950

4 days