

INS. CASE OWNER:

lalitha

CC 3/1111702

3845, Kub3

LKK:

IDAC:

Surveyor:

Fenneth

DOI:

ASSIGNMENT

14/1/18

Date/Time:

14/1/18

Registered in Merimen:

15/1/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

EU 5656E

Name of Insured:

GOM WEE MIAH

Insured Tel No.:

HP:

96704724

Excess Sec II :S\$

D.O.A:

13/1/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

MLN1A/198

Policy No.:

MYA0750

Make / Model:

MAZDA

Place of Accident:

UTY SQUARE UP

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHC 5107H



INSRS:

WSP:

Tel:

Liability:

RMKS:

Trans  
Cab

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

18/1/18  
TH

SHC 5107H - X

EU 5656E - X

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice:

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

JASMINE

Email

Call

Total Liability:

%

100

(Agreed / Assessed) BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

722.25

Loss of Rental (LOR):

S\$

202.92

(

2

days) x 101.46

Loss of Use (LOU):

S\$

80.00

(

540

x

2 days)

Loss of Income (LOI):

S\$

5

(

5

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

5.35

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost:

S\$

Total:

S\$

1010.52

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

1010.52

Name 1:

TRANS-CAB AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Email

Call

OI did not stop at the stop line.

RECEIVED 17 APR 2018

RECEIVED 18 APR 2018

COPY SENT  
12/4/18

ASS. REC. BY:

REF:

T12 /

Kenneth

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

Trans Cob

of

Insured:

Policy No.

Claims No.

Sum Insured:

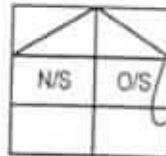
Excess:

(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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

1 1/2 days

Res.: Yes or No

Lum Sum:

200 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHC 510714

Yr Regn:

12, 13

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

Truck / Trailer or

Make:

Perant Maroon

c.c

1995

Colour

M. White 1R

A/C:

Insured / Std / NI / NA

Sp. Reading

164479

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VFI ABL 15AUC 276178

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: Citi 215/60R16

R: Pirelli

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front

Rear

R/Bal.

J

mm

R/Bal.

9

mm

L/Bal.

J

mm

L/Bal.

9

mm

D.O.A.

13/12/17

D.O.I.

14/12/17

Survey held at

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

Old body

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

Date / Time

Action / Instruction

15/12

File pass to Catherine

u

B 675.00

P/P - \$ 675.00 (Red: \$ 20611.37 / 97%.)

Date/Time, File Pass to?



Prel. Report

1)



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee

Transportation:

\$ + RS \$

Photos

Others

TOTAL

Report Format :

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

**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			
INDIA INTERNATIONAL INSURANCE PL		Ref : CC3/III17023855/Kub3	
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711		Date : 15-12-2017	
		Code : III2	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>			
Insured Veh.	EU 5656E	Veh. Inspected	SHC 5107H
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	15/12/2017
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	13/12/2017	Inspection Date	14/12/2017
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		
<b>5a. Remarks</b>			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

**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

**SHC5107H -**

AAD1712-136

*Not Authorised**8675.00*

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

**SHC5107H - JHOW**

VF1ABL15AUC276178

RENAULT

LATITUDE

13.12.2017

**III****PART****LIST**

1	1	BUMPER COVER FRT	\$	1,259.42
2	1	FENDER PANEL FRT RH	\$	783.83
3	1	WHEELARCH FRT RH	\$	278.84
4	1	DOOR PANEL FRT RH	\$	2,844.66
5	1	DOOR HINGE UPPER RH	\$	274.50
6	1	DOOR HINGE LOWER RH	\$	300.55
7	1	DOOR CHECK FRT RH	\$	194.77
8	1	DOOR LOCK FRT RH	\$	908.75
9	1	DOOR CATCH FRT RH	\$	131.23
10	1	DOOR HANDLE OUTER FRT RH	\$	258.12
11	1	DOOR HANDLE CAP FRT RH	\$	26.44
12	1	DOOR HANDLE SEAL FRT RH	\$	7.89
13	1	DOOR HANDLE COVER FRT RH	\$	13.22
14	1	DOOR HANDLE MODULE FRT RH	\$	133.60
15	1	DOOR FINISHER FRT RH	\$	515.06
16	1	DOOR MOULDING FRT RH	\$	176.82
17	1	DOOR GRAB HANDLE FRT RH	\$	210.96
18	1	DOOR MIRROR RH	\$	1,483.40
19	1	DOOR MIRROR GLASS RH	\$	148.20
20	1	DOOR MIRROR BACK COVER RH	\$	218.46
21	1	DOOR WHETHERSTRIP FRT RH	\$	474.21
22	1	DOOR SEAL FRT RH	\$	68.67
23	1	ROCKER PANEL OUTER RH	\$	987.49
24	1	DOOR PANEL REAR RH	\$	2,844.66

<b>TOTAL</b>	\$	<b>14,543.76</b>
<b>10%</b>	\$	<b>1,454.38</b>
	\$	<b>13,089.39</b>

**Specical Nett**

1	1SET	WHEELARCH CLIP FRT RH	\$	66.00	X
2	1SET	FRONT BUMPER CLIP	\$	66.00	X
3	1	RIM RH FRT	\$	385.00	X

**TRANS-CAB AUTO SERVICES PTE LTD**

AAD1712-136

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHC5107H -

4	1	TYRE RH FRT	\$	330.00	X
5	1	DOOR STICKER "Trans-cab"	\$	80.00	60.00
6	1	DOOR STICKER "Classic"	\$	30.00	15.00
7	1	DOOR STICKER "6555-3333"	\$	80.00	X

<b>TOTAL</b>	<b>\$</b>	<b>1,037.00</b>
<b>TOTAL PARTS</b>	<b>\$</b>	<b>14,126.39</b>

To Check Electrical Lighting Concerned.	\$	170.00	X
Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	\$	2,800.00	200
Putty and spray painting of the affected portion.	\$	3,000.00	400
To Transfer Of Fender Fittings, Attachments And Perform Water Seepage Test.	\$	170.00	X
To transfer of tire, rim and on wheel balancing.	\$	170.00	X
To check steering geometry and computer wheel alignment	\$	220.00	X
To Remove And Refit Front W/Screen Glass To Facilitate Bodywork Repair.	\$	170.00	X
To transfer of door fittings, attachment and perform water seepage test.	\$	170.00	X
Towing fees	\$	120.00	X
To rust-proofing of the affected areas.	\$	170.00	X

<b>TOTAL</b>	<b>\$</b>	<b>7,160.00</b>
<b>Over All Total</b>	<b>\$</b>	<b>21,286.39</b>

**(PARTS BY PARTS) Repair Days****10 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

Accepted by Repairer:

**Trans-Cab Services Pte Ltd**

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1712-136

Your Ref : EU5656E

Date : 26.March 2018

**INDIA INT'L INS PTE LTD**

Dear Sir/Madam,

**ACCIDENT INVOLVING SHC5107H AND EU5656E ON 13/12/17 02:04 PM ALONG CITY SQUARE CARPARK E7 PILLAR**

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	722.25
2.	Loss of Rental for <u>3</u> days @ \$ <u>101.46</u> per day	\$	202.92
3.	Loss of Income for <u>3</u> days @ \$ <u>40</u> per day	\$	80.00
4.	LTA Search Fee	\$	5.35
5.	Survey Fee	\$	0.00
	Total	\$	1,010.52

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

**Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.**

Yours Faithfully

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to [claims@transcab.com.sg](mailto:claims@transcab.com.sg) (6603 1259)

**Trans-Cab Services Pte Ltd**

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

**Authorization To Act**

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHC5107H and EU5656E along CITY SQUARE CARPARK E7 PILLAR on 13/12/17 02:04 PM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 23 (day) of March 2018

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan  
General Manager

## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III- Direct Settlement (PODS)

India Ref: MC2017/3198  
 Claimant Ref: SHC 5107H

We/I, Trans-Cab Auto Services Pte Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 722.25 (repair cost), S\$ 282.92 (loss of use/rental), S\$ 5.35 (search fee), vehicle no. SHC 5107H that was damaged pursuant to the accident which occurred on 13/12/17 (date) at City Square Carpark (location) involving vehicle no. FU5656E (insured vehicle). This is pursuant to the inspection conducted on 14/12/17 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Trans-Cab Services Pte Ltd ("the third party claimant") of vehicle no. SHC 5107H to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHC 5107H (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 1010.52 to TRANS-CAB

Dated this 11 day of 4 20 18

#### CLAIMANT:

Signature: \_\_\_\_\_

Signed by "the workshop" (with chop)

Name: \_\_\_\_\_

NRIC: \_\_\_\_\_

Address: \_\_\_\_\_

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

TRANS-CAB AUTO SERVICES PTE LTD  
 No. 2 Ang Mo Kio Street-63  
 Singapore 569111  
 Tel: 6287 6666 Fax: 6287 7764

#### WITNESS:

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

NRIC: \_\_\_\_\_

Address: \_\_\_\_\_

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

Signed by appointed Surveyor

LKK Auto Consultants Pte Ltd

199607198R

Blk 51, Paya Ubi Industrial Park,  
Ubi Avenue 1, #02-25 | S(408933)





**Trans-Cab Auto Services Pte Ltd**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666

Fax: 6287 7764

Co. Reg. No.: 201019626G

GST Reg. No.: 201019626G

**Tax Invoice / Debit Note**

TO:  
**INDIA INTERNATIONAL INSURANCE PTE LTD**  
64 CECIL STREET  
#05-00 IOB BUILDING  
049711 Singapore  
  
ATTENTION:

INVOICE NO. : INV1801-220  
DATE : 31. January 2018  
REFERENCE NO : AAD1712-136  
TERMS :  
DUE DATE : 31. January 2018  
PAGE : 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHC5107H;DOA 13.12.17(LUMP SUM-18)	1	722.25	722.25

Total SGD Excl. GST : 675.00  
7% GST : 47.25  
Total SGD Incl. GST : 722.25

\*\*\*\* SEVEN HUNDRED TWENTY TWO AND TWENTY FIVE SGD ONLY \*\*\*\*

- 1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"
- 2) Please quote our Invoice Number during payment.
- 3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
- 4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.

THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE

**Trans-Cab Services Pte Ltd**

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

23 March, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 13/12/17 02:04 PM at CITY SQUARE CARPARK E7 PILLAR

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHC5107H. The taxi was hired to TEO BEE GUAN a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$101.46 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan

General Manager

**Trans-Cab Services Pte Ltd**

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

13-12-2017

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
<b>Accident No.</b>	AAD1712-136	<b>Accident Date</b> 13-12-2017
14/12/2017 10:00	15/12/2017 17:20	SHC5107H

**Yours Faithfully,****Trans-Cab Services Pte Ltd****Jasmine Tan****General Manager**

## Vehicle Insurance Particulars Result

Vehicle No.	Incident Date/Time	Insurance Company Name
EU5656E	13 Dec 2017 / 14:04:00	INDIA INT'L INS PTE LTD
EZ3332B	13 Dec 2017 / 11:08:00	AXA INSURANCE PTE LTD

## Print Received Message

This mail is associated with :

\*SHC5107H (MC2017/3198)  
[EU5656E]

TP

TRANS-CAB SERVICES PTE LTD

Dec 13 2017 2:00PM

[GOH WEE MIANG]

Trans-cab Auto Services Pte Ltd

From India International Insurance Pte Ltd (HQ) (III\_SG), sent on 09/04/2018 14:45 PM.  
To LKK\_HQ  
Subject Alert - Adj Mandate Approved (S\$1010.52) - SHC5107H - Claim Handler: Lalitha Krishnan

Approved: 1010.52.

## ...CLAIM SUBFOLDER...(Pending for Survey Report)

Direct Settlement



















## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	15 Dec 2017 <a href="#">Edit Reg</a>		14 Dec 2017 00:00 <a href="#">Edit Adj Rpt</a>	<b>\$5675.00</b> <a href="#">Edit Estimates</a>	<b>\$5675.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured:	GOH WEE MIANG, ID: S1204724Z								
Main Claimant:	TRANS-CAB SERVICES PTE LTD, Co. Reg. No.: 200303878K								
Vehicle Reg. No.:	SHC5107H	Date of Loss:	13/12/2017 14:00 - :59 [47 Months and 16 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MC2017/3198	Policy/Cover Note No.:	M494750						
Vehicle Reg. No. (Insured):	EU5656E	Policy No. (Claimant):	VPX/P1680520						
		Excess:							
Repairer:	Trans-cab Auto Services Pte Ltd (Ang Mo Kio) 2, Ang Mo Kio Street 63, 569111 Ang Mo Kio - Tel: 62876666								
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Lalitha Krishnan - 6347 6139]								
Claimant's Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 27/12/2017]								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
<ul style="list-style-type: none"> <li>III_SG (09/04/2018): Alert - Adj Mandate Approved (\$51010.52) - SHC5107H - Claim Handler: Lalitha Kri...</li> <li>III_SG (21/12/2017): Alert - Adj Mandate Approved (\$50.00) - SHC5107H - Claim Handler: Lalitha Krishn...</li> </ul>									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SHC5107H (MC2017/3198)  
[EU5656E]  
TP  
TRANS-CAB SERVICES PTE LTD  
Dec 13 2017 2:00PM  
[GOH WEE MIANG]  
Trans-cab Auto Services Pte Ltd

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>		<b>View</b> <a href="#">View in Browser</a>		
<b>Photos/Images</b>		3 per page		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
2	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
3	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
4	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
5	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
6	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
7	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
8	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
9	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
10	09/04/18 14:18	General View	 Load JPG	<input checked="" type="checkbox"/>
<b>Documentation</b>		1 per page		
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	15/12/17 17:32	TP ESTIMATE- MARKED	 Load PDF	
2	15/12/17 17:32	TP GIA REPORT	 Load PDF	
3	05/04/18 16:35	WORKSHOP INVOICE	 Load PDF	
4	05/04/18 16:35	RENTAL RECEIPT	 Load PDF	
5	05/04/18 16:35	LTA SEARCH	 Load PDF	
6	05/04/18 16:35	LOD	 Load PDF	
7	13/04/18 15:07	AUTHORISATION TO ACT FORM	 Load PDF	
8	13/04/18 15:07	DISCHARGE VOUCHER	 Load PDF	
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	18/12/17 08:32	Singapore Accident Statement	 Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>		<a href="#">Reset</a>   <a href="#">Save</a>   <a href="#">Print</a>
There are no document checklists configured.		
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>		
<div style="border: 1px solid #ccc; width: 100%;"></div>		
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>		

# LKK Auto Consultants Pte Ltd

(Co.Reg.No:199607198R)

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

Singapore 408933

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC3/III17023855/KUB3Q2

Date: 13/04/2018

### REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No: M494750

Claimant Vehicle No : SHC5107H

Insured Vehicle No : EU5656E

Date of Loss: 13/12/2017

Nature of Claim: TP Claim No: MC2017/3198

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC5107H

Make &amp; Model: RENAULT LATITUDE, 2.0 DCI AUTO D/AB 4DR (A) Engine No: M9R8839C000724

Reg. Date: 27/12/2013 (Man. Year: 2013)

Chassis No: VF1ABL15AUC276178

Colour: Metallic White/Red

Odometer: 164479 km

Engine Capacity: 1995 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

### CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition: Yes

### CONDITION OF TYRES

Front Tyre Size: 215/60 R16 Rear Tyre Size: 215/60 R16

Front Left Side: Giti 8 mm Rear Left Side: Rovelo 9 mm

Front Right Side: Giti 8 mm Rear Right Side: Rovelo 9 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	14,126.37	75.00	14,051.37	99.47
Miscellaneous Items	0.00	0.00	0.00	
Labour	7,160.00	600.00	6,560.00	91.62
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>21,286.37</b>	<b>675.00</b>	<b>20,611.37</b>	<b>96.83</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>1,490.05</b>	<b>47.25</b>	<b>1,442.80</b>	<b>96.83</b>
<b>Nett Amount (S\$)</b>	<b>22,776.42</b>	<b>722.25</b>	<b>22,054.17</b>	<b>96.83</b>
<b>+ Loss of Use (2.0 x S\$40.00/day) (S\$)</b>		80.00		
<b>+ Car Rental (2.0 x S\$101.46/day) (S\$)</b>		202.92		
<b>+ Doc/Search Fee (S\$)</b>		5.35		
<b>Nett Liability (S\$)</b>		<b>1,010.52</b>		

### INSPECTION

Date of Assignment: 14/12/2017

Date Inspected: 14/12/2017 Inspected At:

Trans-cab Auto Services Pte Ltd (Ang Mo Kio)  
2, Ang Mo Kio Street 63  
Singapore 569111

Estimated Period of Repair: 1.5 days



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**Adjuster:** KENNETH KONG**Manager:** THIN THIN HLAING

*NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.*

## REPAIR DETAILS

## Reference

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 05 Apr 2018)
<b>Parts:</b> 143	RENAULT LATITUDE 2.0 DCI AUTO D/AB 4DR (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b> (Unsubmitted, no print-code for SHC5107H)	
<b>Validity:</b>	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BUMPER COVER FRT	Serviceable	1,259.42 FL	*- FL
2	1		*FENDER PANEL FRT RH	Repair	783.83 FL	*- FL
3	1		*WHEELARCH FRT RH	Serviceable	278.84 FL	*- FL
4	1		*DOOR PANEL FRT RH	Repair	2,844.66 FL	*- FL
5	1		*DOOR HINGE UPPER RH	Repair	274.50 FL	*- FL
6	1		*DOOR HINGE LOWER RH	Repair	300.55 FL	*- FL
7	1		*DOOR CHECK FRT RH	Serviceable	194.77 FL	*- FL
8	1		*DOOR LOCK FRT RH	Repair	908.75 FL	*- FL
9	1		*DOOR CATCH FRT RH	Repair	131.23 FL	*- FL
10	1		*DOOR HANDLE OUTER FRT RH	Serviceable	258.12 FL	*- FL
11	1		*DOOR HANDLE CAP FRT RH	Serviceable	26.44 FL	*- FL
12	1		*DOOR HANDLE SEAL FRT RH	Serviceable	7.89 FL	*- FL
13	1		*DOOR HANDLE COVER FRT RH	Serviceable	13.22 FL	*- FL
14	1		*DOOR HANDLE MODULE FRT RH	Serviceable	133.60 FL	*- FL
15	1		*DOOR FINISHER FRT RH	Serviceable	515.06 FL	*- FL
16	1		*DOOR MOULDING FRT RH	Serviceable	176.82 FL	*- FL
17	1		*DOOR GRAB HANDLE FRT RH	Serviceable	210.96 FL	*- FL
18	1		*DOOR MIRROR RH	Serviceable	1,483.40 FL	*- FL
19	1		*DOOR MIRROR GLASS RH	Serviceable	148.20 FL	*- FL
20	1		*DOOR MIRROR BACK COVER RH	Serviceable	218.46 FL	*- FL
21	1		*DOOR WEATHERSTRIP FRT RH	Serviceable	474.21 FL	*- FL
22	1		*DOOR SEAL FRT RH	Serviceable	68.67 FL	*- FL
23	1		*ROCKER PANEL OUTER RH	Repair	987.49 FL	*- FL
24	1		*DOOR PANEL REAR RH	Repair	2,844.66 FL	*- FL
25	1		*SET WHEELARCH CLIP FRT RH	Not Necessary	66.00 FS	*- FS
26	1		*SET FRONT BUMPER CLIP	Not Necessary	66.00 FS	*- FS
27	1		*RIM RH FRT	Serviceable	385.00 FS	*- FS
28	1		*TYRE RH FRT	Serviceable	330.00 FS	*- FS
29	1		*DOOR STICKER TRANS-CAB	Necessary	80.00 FS	*60.00 FS
30	1		*DOOR STICKER CLASSIC	Necessary	30.00 FS	*15.00 FS
31	1		*DOOR STICKER 6555-3333	Not Necessary	80.00 FS	*- FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>15,580.75</b>	<b>75.00</b>
<b>- List Item Discount on L Items 10.00/10.00% (\$\$)</b>	<b>1,454.38</b>	<b>0.00</b>
<b>Total Parts (\$\$)</b>	<b>14,126.37</b>	<b>75.00</b>

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	0.00
2	PANEL BEATING ,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS ,ADJUST AND REALIGN THE SAME.	New	2,800.00	200.00
3	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	3,000.00	400.00
4	TO TRANSFER OF FENDER FITTINGS ,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	New	170.00	0.00
5	TO TRANSFER OF TIRE ,RIM AND ON WHEEL BALANCING	New	170.00	0.00
6	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00
7	TO REMOVE AND REFIT FRONT W/SCREEN GLASS TO FACILITATE BODYWORK REPAIR	New	170.00	0.00
8	TO TRANSFER OF DOOR FITTINGS ,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST	New	170.00	0.00
9	TOWING FEES	New	120.00	0.00
10	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	0.00
Gross Labour Cost (\$\$)			<b>7,160.00</b>	<b>600.00</b>

Report was unsubmitted during this print-out.

&lt; END OF ESTIMATES &gt;