

A.S. REC. BY:

REF:

CS/SPT/17020611/R/vbsh

Special Instruction:

Surveyor: RagulASSIGNMENT (Office)From (Person): Abdul Rahman of SPT Date/Time: 28/12/2017

Estimated Cost: _____ Bill to: _____

OD / ~~TP~~ WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLF 7019C Insured: Gx239Bat Workshop m/s Auto Insure Tel: _____of 6 Marsiling LanePolicy No: _____ Claim No: ACMD/105/009/2017/194

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 27.12.2017

(Client's Record)

CA / REV / REP. / REV 24 HRS wpi

29.12.2017

H.O.D. Endorsement: _____

Date/Time: 28.12.2017 3:58pm Person Contacted: Serene Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate	Do Not Finalize
	SLF 7019C - x	
	Gx 239B - x	
<u>31/1/18</u>	<u>Submit \$ 2266.48</u>	

Survey Department Check List (Case Handler)

Reference No.: CS / SPF 17024611 / R1v6
 Policy Type: OD / TP / TP RES / TL / EVA

Case Handler

Typist

Admin (): Case handler to make sure all Information created by the assignment team are ACCURATE.

1) Office Assign Form		Y-Date	N-Date	Y-Date	N-Date
C	Reference No.	✓			
C	Customer Code				
N	Assign From				
C	Assign Date	✓			
C	Veh No (Inspected)	✓			
C	Veh No (Insured)	✓			
C	D.O.A	✓			
C	Policy No				
C	Claim No	✓			
C	Insurance Authorisation (CA /REV/REP)				
C	Report Type	✓			
C	Weekend Charges				
N	Survey held at/Repairer	✓			
C	Excess				

Surveyor (): Case handler to make sure the surveyor completed all required information.

(1) Assignment Form		Y-Date	N-Date	Y-Date	N-Date
C	Vehicle No	✓			
C	Regn Month/Year	✓			
N	Vehicle Type	✓			
N	Make & Model	✓			
C	Engine Capacity. (C.C)	✓			
N	Colour	✓			
C	Odometer. (Sp.Reading)	✓			
C	Chassis No	✓			
N	General Condition	✓			
N	Steering	✓			
N	Brake	✓			
N	Modification (Modi)	✓			
C	Tyre Size	✓			
N	Tyre Make	✓			
C	Tyre Balance	✓			
C	Date of Inspection	✓			
N	Survey held	✓			
N	Des.of Damages	✓			

(2) System - (Views/Merimen)

C	Damaged Vehicle Photographs Uploaded	✓			
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(3) Workshop Estimate/Assignment Form

N	ALL Parts condition	✓			
C	Market Value for OD cases				
C	Estimate Repair Cost for PRI (RSI, TMI, MSIG)	✓			
C	Days of repair				
C	Finalised Amount				
C	Re-inspection Cases to Finalize within 5 Days				

(4) System - (Views/Merimen)

C	Resurvey photo Uploaded	✓			
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Check By: VERON 5/1/18
 Case Handler Date

*C: Critical *N: Non-Critical

21/05/2014




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			
AUTOMOTIVE ENGINEERING & MGT DIVISION		Ref : CS/SPF17024611/R1vb	
ACCIDENT CLAIM SECTION (SINGAPORE POLICE FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD POLICE ACADEMY SINGAPORE 298333		Date : 28-12-2017	
		Code : SPF	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	QX 239B	Veh. Inspected	SLF 7019C
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2017/194	Excess (\$)	0.00
Assign From	ABDUL RAHMAN	Assign Date	28/12/2017
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	27/12/2017	Inspection Date	29/12/2017
Survey held at	AUTO INSURE PTE LTD 6 MARSILING LANE S739145		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			



SINGAPORE POLICE FORCE

SPF Accidents Claims Section
Automotive Engg & Mgmt Div
Police Logistics Department
No. 1 Mount Pleasant Road
Block 8 Old Police Academy
#02-12 Singapore 298333

Your Ref: SLF7019C

Our Ref: AEMD/105/009/2017/194

Date: 28 December 2017

Tel: 64784840

Fax: 64784848

Messrs LKK Auto Consultants Pte Ltd
Paya Ubi Industrial Park
51 Ubi Avenue 1 #01/02-25
Singapore 408933

Via Fax only: 62564315

Dear Sir/Madam,

ACCIDENT ON 27 DECEMBER 2017 INVOLVING POLICE VEHICLE QX239B AND OTHER VEHICLE SLF7019C

We refer to the above matter.

- 2 Kindly arrange for an Inspection of vehicle no. **SLF7019C** at **Messr Auto Insure Pte Ltd** of **6 Marsiling Lane** Singapore **739145**.
- 3 For appointment kindly contact **Serene Lim** at **Tel: 31572624/31572628**.
- 4 Estimates were not provided by the workshop.
- 5 Thank you.

Yours faithfully,

Abdul Rahman
Accident Claims Officer
for ASST DIRECTOR

A FORCE FOR THE NATION

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 27/12/2017 15:13
 Date Of Accident 27/12/2017 10:50
 Exact Location Of Accident 116 TECK WHYE LANE HDB CHOA CHU KANG OPEN CARPARK
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLF7019C
Insured/Policyholder
 Name Of Registered Owner LCRF PTE LTD
 Co Reg No 201624597K
 Email Address REPORTING@AUTOINSURE.COM.SG
 Mobile Phone No
 Alternative Phone No OFFICE-31572626

Vehicle Particulars

Manufacturer MAZDA
 Model 3-1.5 SEDAN L SP.6EAT (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 THIRD PARTY
 Vehicle Category PRIVATE HIRE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy YES
 Policy Number 999995142
 Cover Note Number

Driver

Name of Driver MUHAMMAD ZAMRI BIN ADDIN
 NRIC No S7904766Z
 Date Of Birth 02/03/1979
 Occupation OUTDOOR
 Date Of Driving Pass 27/09/2012
 Driving Experience 5 YEARS AND 3 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-88212626
 Fax Number
 Contact Number
 Email Address NOEMAIL

Address 6 MARSILING LANE
 Postcode
 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 -
 Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD ON COLLISION
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles involved in the accident
 Was any body injured in the Accident? NO
 Was any injured conveyed to hospital by ambulance? 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 WOODLANDS WEST NPC
 Police Station Address ROAD: 9 MARSILING LANE , POSTCODE: 739146 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number QX239B
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category GOVERNMENT
 Name of Driver SOO AU EN
 NRIC/Passport Number S9346250E
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

Sketch Plan #3

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 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 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:

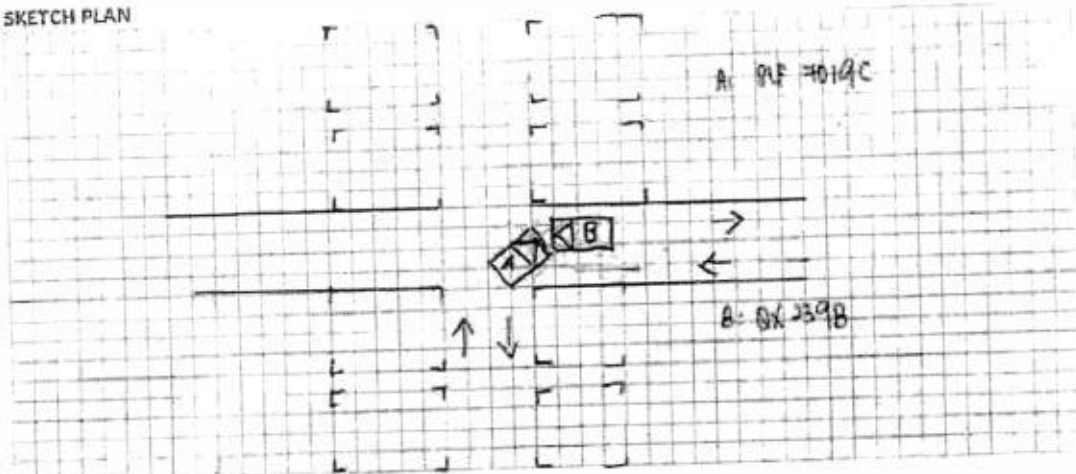
[Signature]
27/12/17
@ 1515hrs

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

[Signature]

Sketch Plan #4

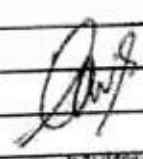
SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report
 3/20171227/2075

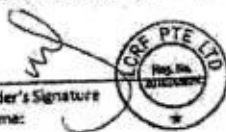
I will like to add to the above police report as the police car vehicle B is travelling too much to the right hand side and against the flow of traffic, thus the accident happened. I have video footage to record the entire incident.


 Mohamed Amin

DECLARATION

I/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:

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



**SINGAPORE
POLICE FORCE**



J/20171227/2075

1 of 2

Report No. J/20171227/2075

POLICE REPORT (NP299)

Police Station Of Origin
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

Date/Time Report Made 27/12/2017 14:05	Vide Report No. J/20171227/0116	Station Diary No. 46
Name Of Informant MUHAMMAD ZAMRI BIN ADDIN	Address	
ID Type / ID No. NRIC NO / S7904766Z	Contact No. Home/Office	Mobile
Nationality SINGAPORE CITIZEN	Email Address	
Occupation PRIVATE HIRE DRIVER	Sex Male	Age 38
Institution/School Name	Date of Birth 02/03/1979	Race Malay
Date/Time Of Incident 27/12/2017 10:50	Location Of Incident 116 TECK WHYE LANE HDB-CHOA CHU KANG SINGAPORE 680116 OPEN CARPARK	

Brief details.

On 27/12/2017 at about 1050hrs, I was driving a Mazda 3 grey in colour bearing registration plate number (SLF7019C) and I entered the open carpark at Blk 116 Teck Whye Lane. I was making right turn at the mini cross junction after going through the gantry. There are 2 vans parked and on my right and obstructed my view of vehicles travelling from my right. I was in the midst of the right turn and I saw a Police vehicle coming from my right. The police vehicle is driven by Soo Au En NRIC: S9346250E

Signature Of Officer Recording The Report: J / Sgt 2 JOHNSON SONG ZHI HONG
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: Traffic Police Selena Contact No.: 65476423

Signature Of Informant:
Date/Time: 27/12/2017 14:05
Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



J/20171227/2075

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20171227/2075

residing at Blk 233 Bukit Batok East Ave 5 #10-41 Singapore 650232. I stopped for about 6 seconds and sounded a short horn however the police vehicle collided into my front right bumper. My car suffered the following damages: The front right signal light is damaged, dent on the front right bumper, bumper falling off. We then exchange particulars and he informed his team leader of the accident. There is in car camera and I have already handed the footage over to the driver's team leader. I am unsure of the police vehicle registration plate number. Traffic police then attended to the scene and advised me to lodge a police report with TP IO in charge: Selena Contact: 65476423 vide incident J/20171227/0116. No other government properties damaged and nobody is injured.

Signature Of Officer Recording The Report:

J / Sgt 2 JOHNSON SONG ZHI HONG

Signature Of Interpreter:
Not applicableOfficer In-Charge Of Case:
Traffic Police
Selena
Contact No.: 65476423

Authentication Stamp

Signature Of Informant:

Date/Time:
27/12/2017 14:05

Classification Of Case:

Sketch Plan #5 Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7904766Z**



Name
MUHAMMAD ZAMRI BIN ADDIN

Race
MALAY

Date of birth
02-03-1979

Country/Place of birth
SINGAPORE

Sex
M

57904766Z

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Identity Card No. **S7904766Z**

MUHAMMAD ZAMRI BIN ADDIN

Date of birth **02 Mar 1979**

Valid until **27 Sept 2017**



002107290C

5336760



NRIC No. **S7904766Z**



Date of issue
18-07-2014

APT BLK 735 JURONG WEST STREET 75 #03-31
SINGAPORE 640735

NRIC No: **S7904766Z** Date: **07/10/2017**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 1 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg **27 Sep 2012**



AP 438A



Auto Insure Pte. Ltd.

6 Marsling Lane
Singapore (779145)
E: claims@autoinsure.com.sg
W: www.autoinsure.com.sg
T: 3157 2626 F: 6368 0001
GST No.: 201457800M

Page No.1

AUTOMOBILE ASSESSMENT REPORT

Our Ref: SLF7019C
Your Ref: QX2398

Date: 28-Dec-17

BY EMAIL ONLY

(claims@autoinsure.com.sg)

ATTENTION: MOTOR CLAIMS DEPT

Assessed Vehicle No : SLF7019C
Car Make and Model : MAZDA3 SP 1.6L A/T ABS D/AS ZWD 4DR
Date of Accident : 27-Dec-17
Date of Assessment : 28-Dec-17

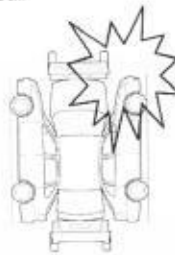
We have carried out a physical assessment of SLF7019C at our workshop Auto Insure Pte Ltd accordingly and are pleased to submit our report as follow:

4. DESCRIPTION OF DAMAGE

At the time of the inspection observed that this vehicle had sustained damages to the FRONT RH portion of the vehicle.

Please see attached schedule for details.

Remarks: Nil



Estimated Amount : P/P
Adjusted Amount : \$ 4,700.00
Est. Repair Days : 3

Pursuant to your instruction, we have **NOT AUTHORIZED** repair.
The assessment was conducted on a **"WITHOUT PREJUDICE"** basis.

If we are not notified of anything within **2 weeks** from the date hereof, this report shall be treated as correct.

Disclaimer

This report is intended for the exclusive use of the addressee solely in relation to the loss of person or property in which the assessed vehicle is involved.
No liability or responsibility whatsoever shall be held by
AUTO INSURE PTE. LTD. for any reliance on this report by any third party.

Our Ref: SLF7019C
Your Ref: QX239B

QX239B				
S/NO	QTY	DESCRIPTIONS	ASSESSED CONDITION	EST. BY WORKSHOP
PARTS REPLACEMENT - LIST ITEMS				
1	1	FRONT BUMPER	\$	1,385.50
2	1	FRONT BUMPER SIDE RETAINER RH	\$	118.00
3	1	FRONT REINFORCEMENT	\$	589.60
4	1	FRONT FENDER INNER SHIELD RH	\$	285.60
5	1	FRONT FOG LAMP COVER RH	\$	90.00
6	1	FRONT FOG LAMP RH	\$	420.00
7	1	FRONT GRILLE CHROME RH	\$	240.00
8	1	FRONT BUMPER PROTECTOR RH	\$	320.00
			SUB TOTAL	\$ 3,648.70
			LESS 20%	\$ 689.74
			TOTAL AMOUNT	\$ 2,758.96
SPECIAL NETT ITEMS				
1	1 set	FRONT BUMPER CLIPS	\$	60.00
			SUB TOTAL	\$ 60.00
			TOTAL PARTS COST	\$ 60.00
S/NO	DESCRIPTION			EST. BY WORKSHOP
LABOUR & PAINTWORK				
1	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; PANEL BEAT & RESHAPE THE AFFECTED AREAS AND REPLACED THE DAMAGED PARTS AND COMPONENTS			\$ 500.00
2	TOWING CHARGE			\$
3	TO REMOVE AND REFIX DOOR TRIM/POWER WINDOW AND MOTOR REGULATOR			\$
4	TO CONDUCT HEADLAMP FOCUS			\$
5	TO DIAGNOSE ERASE FAULT MEMORY AFTER REPAIR			\$
6	TO REMOVE / REFIX WIRING SYSTEM AT ACCIDENT AND CHECK FOR PROPER FUNCTIONS			\$ 150.00
7	TO REMOVE / INSTALL REAR REVERSE SENSOR			\$
8	TO REMOVE / REFIX UPHOSTERY, GARNISH AND ATTACHMENT PARTS			\$
10	LABOR FOR UNDERCARRIDGE			\$
9	WHEEL ALIGNMENT			\$
10	TO RESPRAY AND SUPPLY EXPANDABLE ITEMS & PUFFY ON PARTS REPLACED			\$ 500.00
11	TO PERFORM ANTI-RUST TREATMENT ON AFFECTED AREAS			\$ 100.00
12	TO VACUUM, WAXING & CLEAN			\$ 100.00
13	TO PERFORM WATER SEEPAGE TEST ON REPAIRED PORTIONS			\$ 100.00
			TOTAL BEFORE GST	\$ 4,468.96
			GST 7%	\$ 312.83
			TOTAL (PARTS & LABOUR):	\$ 4,781.79

Our Workshop has agreed to undertake the job at a sum of \$4,781.79 for direct settlement with the third

Kindly ensure we adhere to the code of practice as per GIA report to finalize this amount within **2 WEEKS** upon completion of repair of this vehicle.

Yours Faithfully,

Jason Heng
Claims Director

REPAIR DAYS: (RECOMMENDED)	PART BY PART / LUMP SUM
INDICATE TYPE OF REPAIR: (RECOMMENDED)	
SURVEYOR NAME:	
SURVEYOR COMPANY:	
SURVEYOR CONTACT:	
SURVEYOR EMAIL:	
SURVEYOR SIGNATURE:	

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:

Rasul
Hp 90010068
2 days
7/1
29/12/17 @ 10/10
Resurvey by paint

1746.48
60.00
460.00
2266.48

2 days

4/1/18



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

AUTOMOTIVE ENGINEERING & MGT DIVISION Ref : CS/SPF17024611/R1vbs2

ACCIDENT CLAIM SECTION(SINGAPORE POLICE
FORCE) 1 MOUNT PLEASANT ROAD BLK 8 OLD
POLICE ACADEMY SINGAPORE 298333

Date : 12-01-2018



ATTN: ABDUL RAHMAN

Code : SPF

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	QX 239B	Veh. Inspected	SLF 7019C
Policy No.		Coverage (\$)	0.00
Claim No.	AEMD/105/009/2017/194	Excess (\$)	0.00
Assign From	ABDUL RAHMAN	Assign Date	28/12/2017

2. Vehicle Particulars & Condition

Make & Model	MAZDA 3 1.5L SP	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JM6BM42A8G0346701	Colour	BLACK
Odometer	91387	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60R16	ACHILLES	6 mm
L/H Front Tyre	205/60R16	ACHILLES	6 mm
R/H Rear Tyre	205/60R16	ACHILLES	6 mm
L/H Rear Tyre	205/60R16	ACHILLES	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT O/S PORTION. DAMAGES SEE DETAILS.

5. General Information

Accident Date	27/12/2017	Inspection Date	29/12/2017
Survey held at	AUTO INSURE PTE LTD 6 MARSILING LANE S739145		

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:	2 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. SLF 7019C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER	DEFORMED	1,385.50	1,385.50
1	FRONT BUMPER SIDE RETAINER RH	NECESSARY	118.00	118.00
1	FRONT REINFORCEMENT	BENT	589.60	589.60
1	FRONT FENDER INNER SHIELD RH	SERVICEABLE	285.60	-
1	FRONT FOGLAMP COVER RH	SCRATCHED	90.00	90.00
1	FRONT FOGLAMP RH	SERVICEABLE	420.00	-
1	FRONT GRILLE CHROME RH	SERVICEABLE	240.00	-
1	FRONT BUMPER PROTECTOR RH	SERVICEABLE	320.00	-
	LESS 20% DISCOUNT		-689.74	-436.62
			2,758.96	1,746.48
SPECIAL NETT ITEMS				
1	SET FRONT BUMPER CLIPS (SN)	NECESSARY	60.00	60.00
			60.00	60.00
LABOUR				
	TO REMOVE THE AFFECTED PARTS & FITTINGS TO COMMENCE REPAIRS; PANEL BEAT & RESHAPE THE AFFECTED AREAS AND REPLACED THE DAMAGED PARTS AND COMPONENTS.		600.00	200.00
	TOWING CHARGE. (NPA)	NOT NECESSARY	-	-
	TO REMOVE AND REFIX DOOR TRIM / POWER WINDOW AND MOTOR REGULATOR. (NPA)	NOT NECESSARY	-	-
	TO CONDUCT HEADLAMP FOCUS. (NPA)	NOT NECESSARY	-	-
	TO DIAGNOSE ERASE FAULT MEMORY AFTER REPAIR. (NPA)	NOT NECESSARY	-	-
	TO REMOVE / REFIX WIRING SYSTEM AT ACCIDENT AND CHECK FOR PROPER FUNCTIONS.		150.00	30.00
	TO REMOVE / INSTALL REAR REVERSE SENSOR. (NPA)	NOT NECESSARY	-	-
	TO REMOVE / REFIX UPHOLSTERY, GARNISH AND ATTACHMENT PARTS. (NPA)	NOT NECESSARY	-	-
	LABOUR FOR UNDERCARRIAGE. (NPA)	NOT NECESSARY	-	-
	WHEEL ALIGNMENT. (NPA)	NOT NECESSARY	-	-
	TO RESPRAY AND SUPPLY EXPANABLE ITEMS & PUFFY ON PARTS REPLACED.		600.00	200.00
	TO PERFORM ANTI-RUST TREATMENT ON AFFECTED AREAS.	NOT NECESSARY	100.00	-
	TO VACUUM, WAXING & CLEAN.	NOT NECESSARY	100.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO PERFORM WATER SEEPAGE TEST ON REPAIRED PORTIONS.		100.00	30.00
			1,650.00	460.00
GRAND TOTAL			4,468.96	2,266.48
RECOMMENDED COST OF REPAIRS				2,266.48

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MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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