

Surveyor: Taufik ASSIGNMENT (Office)From (Person): Grace Teo of SMD Date/Time: 05/01/2018 @ 2:09pm

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: GBF 4487Y Insured: PC 2902at Workshop m/s Woon Meng Motor Tel: 6316 1131 / 51of 50, Bkt Batok St. 23 # 01-06Policy No: _____ Claim No: CMTD1800102/AGC

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 04/01/2018
(Client's Record)CA / REV / REP. / REV 24 HRS 'wp' H.O.D. Endorsement: _____Date/Time: 4:22pm @ 05/01/17 Person Contacted: Ms. Heng Vehicle ☒ IN ☐ OUT

| Date/Time | Action/Instruction (<u>✓</u>) Estimate |
|-----------|---|
| | <u>GBF 4487Y-X</u> |
| | <u>PC 2902 - CS/FCI17008704 / Stbe 2</u> D.O.A. = <u>21/04/2017</u> |
| | |
| | <u>Confirm L/s \$4,000.00 @ 6 days with Ms Heng</u> |
| | <u>Red: \$3054.59, 43%.</u> |

Signature: *Tough*

REF:

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/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.



Bal. or Market Value: _____
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: GRF44874 Yr Regn: 2016 / Nov
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Nissan NV200 C.C. 1461
 Colour: white A/C: Insured / Std / NI / NA
 Sp. Reading: 50230 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: VSKYBAM20Z031954
 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: _____ R: _____

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

Front _____ Rear _____
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 5/1/18 R1730
 Survey held at 40 Woon May RS
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction Lo Regn - 38780

RECEIVED 04 JUN 2018

Date/Time, File Pass to? ☐ : Preli. Report

1) *by pass* ☒ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 6

Resurvey No. of Trip: -

Survey Fee:

Transportation

Report Format: TP

Lump Sum / I.B.I.: (\$ 400)

Add Fee:

☐ Site Insp. (\$ _____)

☐ Interview (\$ _____)

☐ Tech. Invs (\$ _____)

☐ Weekend (\$ _____)

) S+RS (\$ _____)

) Photos

) Others

TOTAL

250



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 | | | |
|--|--|----------------------------|------------|
| SOMPO INSURANCE SINGAPORE PL | | Ref : CS/SMO18000381/T1rd3 | |
| 50 RAFFLES PLACE | | | |
| #05-01/06 | | | |
| SINGAPORE LAND TOWERSINGAPORE 048623 | | | |
| | | Date : 08-01-2018 | |
| | | Code : SMO | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | |
| Insured Veh. | PC 290Z | Veh. Inspected | GBF 4487Y |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | CMTD1800102/AGC | Excess (\$) | 0.00 |
| Assign From | GRACE TEO | Assign Date | 08/01/2018 |
| 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 | 04/01/2018 | Inspection Date | 05/01/2018 |
| Survey held at | WOON MENG MOTOR PTE LTD 50 BUKIT BATOK ST 23 #01-06 MIDVIEW BUILDING SINGAPORE 659578 | | |
| 5a. Remarks | | | |
| A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | |

Catherine Chong (LKK Auto)

From: Teo, Grace <grace.teo@sompo.com.sg>
Sent: Friday, 5 January, 2018 2:09 PM
To: admin-d@lkkauto.com; assignments@lkkauto.com
Cc: Heng Sew Sow; Chan, Shu Hui Agnes; Henry, Irene James
Subject: CMTD1800102/AGC - ACCIDENT INVOLVING PC290Z & GBF4487Y ON 04.01.2018

Our Reference : CMTD1800102/AGC

Dear LKK AUTO/ Mohd Taufikh,

Please make arrangement to conduct the survey for GBF4487Y.

Please be informed that Agnes Chan the handler of this case.

Best Regards

Grace Teo

Claims Division

D: 6329 5170 | T: 6461 6555 | F: 6221 3147



Innovation for Wellbeing

SOMPO

A Century of Trust

Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

Website: www.sompo.com.sg | **Facebook:** www.facebook.com/SompoSG

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From: Heng Sew Sow [mailto:woonmeng@singnet.com.sg]
Sent: Friday, January 05, 2018 2:01 PM
To: Teo, Grace
Cc: Chan, Shu Hui Agnes; Henry, Irene James
Subject: RE: CMTD1800102/AGC - ACCIDENT INVOLVING PC290Z & GBF4487Y ON 04.01.2018

Our Reference : CMTD1800102/AGC

Your Reference: GBF4487Y

Without Prejudice

Date: 5TH January 2018

Attention:
M/S WOON MENG MOTOR

ACCIDENT INVOLVING PC290Z & GBF4487Y ON 04.01.2018

Dear Ms. Heng,

We refer to your Notice of Accident dated 05/01/2018.

Please be informed that Agnes Chan the handler of this case.

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the attached list to conduct the joint pre-repair survey as a single joint expert.

Pre-Repair Survey

| | Motor Surveyor | Surveyor | Selection (Indicate as tick) |
|---|----------------------------------|---------------------------|-------------------------------------|
| 1 | Raleigh Services | Andrew Ow Yong | |
| | | Vincent Ng | |
| 2 | LKK Auto Consultants | Kenneth Kong (North area) | |
| | | Marcus Chua (East area) | |
| | | Mohd Rasul (West area) | |
| | | Mohd Taufikh (West area) | Taufikh |
| 3 | Priority Services | Jimmy Lee | |
| | | Lawrence Ng | |
| | | Jeffery Ong | |
| 4 | JP Knights Adjusters & Surveyors | Jason Lek | |
| 5 | In House surveyor | Teo See Ling | |
| | | | |
| | | | |

Please let us know within **two (2) working days** whether you agree to the appointment of any of these motor surveyors as a single joint expert. You may select up to two of the listed motor surveyors. We will bear the cost of the pre-repair survey carried out by the single joint expert.

Best Regards
Grace Teo
Claims Division
D: 6329 5170 | T: 6461 6555 | F: 6221 3147



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Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623

Website: www.sompo.com.sg | **Facebook:** www.facebook.com/SompoSG

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-----Original Message-----

From: Heng Sew Sow [<mailto:woonmeng@singnet.com.sg>]

Sent: Friday, 5 January, 2018 11:09 AM

To: Henry, Irene James <irene.henry@sompo.com.sg>

Subject: Accident involving GBF4487Y & PC290Z on 04.01.18

Dear Henry/ Irene

We refer to the above accident

Kindly be advised that we will be assisting our client, owner of vehicle no: GBF4487Y, to submit a third party claim against your insured vehicle. We would like to proceed with direct settlement.

Please arrange for your surveyor to liaise with us for an inspection on our client's Vehicle at your earliest convenience.

Location : 50, Bukit Batok St 23 # 01- 06 Midview Building (S) 659578 (Vehicle in)

Thank you.

Best Regards,
Heng Sew Sow (Ms)
Woon Meng Motor Pte Ltd
Tel: 6316 1131/51
Fax: 6316 7050

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 | 05/01/2018 19:12 |
| Date Of Accident | 04/01/2018 13:00 |
| Exact Location Of Accident | LORNIE ROAD TOWARDS THOMSON ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|--|--------------------------------------|
| Vehicle Registration Number | GBF4487Y |
| Insured/Policyholder | |
| Name Of Registered Owner | IBP CERAMICS & STONES PTE LTD |
| Co Reg No | 0 |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-68960727 |
| Vehicle Particulars | |
| Manufacturer | NISSAN |
| Model | VSKYBAM20Z0131954 |
| 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 | COMMERCIAL VEHICLE |
| Insurance Company | |
| Name of Insurance Company | TOKIO MARINE INSURANCE SINGAPORE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | MU010654 |
| Cover Note Number | |
| Driver | |
| Name of Driver | LUCAS PAN RONG GUANG |
| NRIC No | S7509956H |
| Date Of Birth | 11/04/1975 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 25/01/2016 |
| Driving Experience | 1 YEAR AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-87990749 |
| Fax Number | |
| Contact Number | |
| Email Address | LUCASSLCP0411@GMAIL.COM |

DETAILS OF INJURED PERSON 1

Name LUCAS PAN RONG GUANG

Approximate Age

Injuries Sustain

Injured person in which vehicle? GBF4487Y

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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:

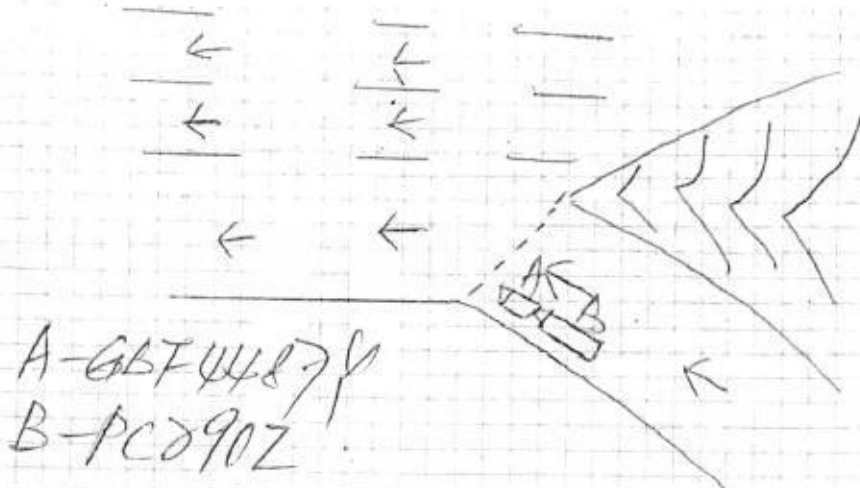
Driver's Signature
(If driver is not the policyholder)
Date & Time: 5 Sep 2018

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

Please note that you might be able to submit an Own Damage Claim under own policy within 14 days

() Claim Own Damage (X) Claim TP () Reporting Only () Claim OD/TP at other workshop

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my vehicle along Linn Road towards Thompson Road. I followed the front vehicle to stop. Suddenly, I felt an impact and realised that a vehicle from behind, PC890Z had hit into my vehicle, causing damage.

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: 05 Jan 2018

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



**SINGAPORE
POLICE FORCE**



T/20180106/2038

1 of 3

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No T/20180106/2038

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|--|-------------------------|----------------------------|
| Date/Time Report Made: 06/01/2018 11:57 | | Vide Report No.: | | Station Diary No. 50 | |
| Informant's Particulars | | | | | |
| Name of Informant: LUCAS PAN RONG GUANG | | | Address: APT BLK 401 FAJAR ROAD #07-205 SINGAPORE 670401 | | |
| ID Type / ID No.: NRIC NO / S7509956H | | | Contact No.: Home/Office: Mobile: 87990749 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 42 | Date of Birth: 11/04/1975 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: Site Coordinator | | | Driving Licence Information: Class: 2B,2A,3,4 Date of Expiry: | | |

| | | | | |
|--|------------------|-----------------------|--|-------------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 04/01/2018 13:00 | Type of Location Bend |
| Location: Along Road 1 THOMSON ROAD filter lane toward 810 Thomson Road | | | | |
| 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: No |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|--------------------|------|-------|-------|------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| GBF4487Y | Van | | | | Slightly Damaged | 0 |
| PC290Z | Bus/Coach/Mi nibus | | | | Slightly Damaged | 0 |

| Details of Person Involved | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20180106/2038

2 of 3

Police Station Of Origin:

Bukit Panjang N.P.C

1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

Report No T/20180106/2038

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|-------------------------------|--|---|
| Passenger | | | |
| Name | CANDRICE YEO KAI NI | ID No. | S8634649D |
| Related Vehicle | GBF4487Y (Van) | Contact No. | 92737067 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | LUCAS PAN RONG GUANG | ID No. | S7509956H |
| Related Vehicle | GBF4487Y (Van) | Contact No. | 87990749 |
| Hospital/Clinic | NG TENG FONG GENERAL HOSPITAL | Class of Driving Licence & Expiry Date | Class: 2B,2A,3,4 Date of Expiry: NIL |
| Date Treatment | 05/01/2018 | Date Discharge | 05/01/2018 |
| No. of Days granted Medical Leave | 02 | Degree of Injury | Slight |
| Driver | | | |
| Name | ANG GUAN CHOO | ID No. | S1454501H |
| Related Vehicle | PC290Z (Bus/Coach/Minibus) | Contact No. | 67558810 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 04/01/2017 at about 1300hrs, I was driving my van (GBF4487Y) together with my wife (Candice) turning left at the filter lane near to No 810 Thomson Road. The front car brake and thus I slowed down and brake as well. When I came to a stop, suddenly a Coach from the rear collided to my rear bumper. We then came down and exchanged particulars. I went down to NTFH hospital twice and was given a total of 4 days of MC.

Bukit Panjang NPC
1 Segar Road #01-05
Singapore 677738
Tel 16892 9999



**SINGAPORE
POLICE FORCE**



T/20180106/2038

3 of 3

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Report No T/20180106/2038

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: SN 117
J /
Sgt 2 CHIN WEI JIE
Signature:

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
06/01/2018 11:57

Officer In Charge Of Case:
TP / AEIT /
SSI KASMAWATI BTE SAMIAN
Contact No.: 65476179

Classification Of Case:

Authentication Stamp
NP168

Woon Meng Motor Pte Ltd

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050
42, Sungei Kadut Ave, Singapore 729666 Tel : 63268523
(Email Address : woonmeng @singnet.com.sg)
Co Reg No. 200603678M GST Reg No. 20-0603678M

Estimate

TP Claim

To : Sampo Insurance Singapore Pte Ltd
Motor Claims Dept

Date : 06 Jan 2018

Dear Sirs :

Fax : 62213302
62213147

RE : ESTIMATE COST FOR NISSAN NV200 - GBF4487Y
ACCIDENT INVOLVING GBF4487Y & PC290Z ON 04/01/2018

| <u>ITEMS</u> | <u>DESCRIPTION</u> | <u>QTY</u> | <u>PRICE</u> |
|--------------|---------------------------------|------------|--------------------------|
| 1 | Rear bumper. | 1pc | \$ 650.40 <i>de✓</i> |
| 2 | Rear tailgate n/s. | 1pc | \$ 1,545.40 <i>bt✓</i> |
| 3 | Rear tailgate outer handle n/s. | 1pc | \$ 351.50 <i>de✓</i> |
| 4 | Rear tailgate inner trim n/s. | 1pc | \$ 242.00 <i>xm✓</i> |
| 5 | Rear tailgate o/s. | 1pc | \$ 1,053.00 <i>bt✓</i> |
| | | | \$ 3,842.30 |
| | Less 30% | | \$ (1,152.69) |
| | | | \$ 2,689.61 |
| 6 | 6pax. | 1pc | \$ 15.00 <i>nei✓</i> |
| 7 | 70km. | 1pc | \$ 15.00 <i>nei✓</i> |
| 8 | Rear sensor. | 1pc | \$ 220.00 <i>200 nm✓</i> |
| 9 | Rear windscreen sealant. | 3pcs | \$ 60.00 <i>nei✓</i> |
| | Sum Carried Forward | | \$ 2,999.61 |

Sum Carried Forward

| | | | | | |
|----|--|------|------------|----------|----------|
| 10 | DCI (nett) | 1pc | \$ | 155.90 | net |
| 11 | Rear bumper retainer @\$35.2ea (nett). | 2pcs | \$ | 70.40 | net |
| 12 | Rear bumper reflector @\$47.9ea (nett). | 2pcs | \$ | 95.80 | x hn |
| 13 | Rear end panel outer (nett). | 1pc | \$ | 178.40 | Rx |
| 14 | Rear end panel top garnish (nett). | 1pc | \$ | 70.20 | Rx hn |
| 15 | Rear tailgate hinge n/s @\$99ea (nett) | 2pcs | \$ | 198.00 | Rx |
| 16 | Rear tailgate top lock n/s (nett) | 1pc | \$ | 99.00 | Rx hn |
| 17 | Rear tailgate lower lock n/s (nett) | 1pc | \$ | 99.00 | Rx hn |
| 18 | Rear emblem (nett) | 1pc | \$ | 71.00 | net |
| 19 | Rear NV200 (nett) | 1pc | \$ | 155.90 | net |
| 20 | Rear rubber (nett) | 1pc | \$ | 82.60 | twiv |
| 21 | Rear tailgate hinge o/s @\$99ea (nett) | 2pcs | \$ | 198.00 | Rx |
| 22 | Rear tailgate top lock o/s (nett) | 1pc | \$ | 99.00 | Rx hn |
| 23 | Rear tailgate lower lock o/s (nett) | 1pc | \$ | 99.00 | Rx hn |
| | | | \$ | 1,672.20 | |
| | | | \$ | (167.22) | |
| | | | \$ | 1,504.98 | |
| | | | | | |
| | | | List Price | \$ | 2,999.61 |
| | | | Nett Price | \$ | 1,504.98 |
| | | | | \$ | 4,504.59 |

Labour Charge & Misc

| | | | | |
|---|---|----|----------|-----|
| To remove, replace, repair & install damaged parts. | } | \$ | 1,000.00 | 700 |
| To R & R rear windscreen glass n/s. | | \$ | 120.00 | ✓ |
| To R & R rear windscreen glass o/s. | | \$ | 120.00 | 60 |
| To R & R wiring and lighting. | | \$ | 60.00 | 30 |
| To putty & spray painting. | | \$ | 1,000.00 | 700 |

Total

703459 \$ 6,804.59

All prices quoted are subjected to 7% GST

This is a computer generated document. No signature is required.

- LKK Auto Consultants hence notify the Repairer of the following:
- 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:

Tanji 97495749
6 days
Lumpsum 5/1/18
Resurvey after repair
sur @ lkkauto.com

Woon Meng Motor Pte Ltd

Office : 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Workshop: 50 Bukit Batok St 23, #01-06 Midview Building, Singapore 659578
Tel: 6316 1131 HP: 9730 2017 Fax: 6316 7050
42, Sungei Kadut Ave, Singapore 729666 Tel : 63268523
(Email Address : woonmeng @singnet.com.sg)
Co Reg No. 200603678M GST Reg No. 20-0603678M

Estimate

TP Claim

To : Sompo Insurance Singapore Pte Ltd
Motor Claims Dept

Date : 06 Jan 2018

Dear Sirs :

Fax : 62213302
62213147

RE : ESTIMATE COST FOR NISSAN NV200 - GBF4487Y (SUPPLEMENTARY)
ACCIDENT INVOLVING GBF4487Y & PC290Z ON 04/01/2018

| <u>ITEMS</u> | <u>DESCRIPTION</u> | <u>QTY</u> | <u>PRICE</u> |
|--------------|---------------------------------|------------|---------------------------------|
| | <u>Labour Charge & Misc</u> | | |
| | To numbering logo. | | \$ 250.00 ^{180.} rec ✓ |
| Total | | | \$ 250.00 |

All prices quoted are subjected to 7% GST.

This is a computer generated document. No signature is required.



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

SOMPO INSURANCE SINGAPORE PL

Ref : CS/SMO18000381/T1rd3n2

50 RAFFLES PLACE

#05-01/06

SINGAPORE LAND TOWERS SINGAPORE 048623

Date : 07-06-2018



Code : SMO

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|-----------------|----------------|------------|
| Insured Veh. | PC 290Z | Veh. Inspected | GBF 4487Y |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | CMTD1800102/AGC | Excess (\$) | 0.00 |
| Assign From | GRACE TEO | Assign Date | 05/01/2018 |

2. Vehicle Particulars & Condition

| | | | |
|--------------|-------------------|--------------|----------|
| Make & Model | NISSAN NV200 | c.c | 1461 |
| Engine No. | HIDDEN | Year of Reg. | 2016 |
| Chassis No. | VSKYBAM20Z0131954 | Colour | WHITE |
| Odometer | 50230 | Steering | IN ORDER |
| Brakes | IN ORDER | Modification | NIL |
| General | GOOD | | |

3. Conditions of Tyres

| | Size | Make | Balance |
|----------------|------------|----------|---------|
| R/H Front Tyre | 175/70 R14 | GOODYEAR | 6 mm |
| L/H Front Tyre | 175/70 R14 | GOODYEAR | 6 mm |
| R/H Rear Tyre | 175/70 R14 | GOODYEAR | 6 mm |
| L/H Rear Tyre | 175/70 R14 | GOODYEAR | 6 mm |

4. Description of Damages

| |
|--|
| THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS. |
|--|

5. General Information

| | | | |
|----------------|--|-----------------|------------|
| Accident Date | 04/01/2018 | Inspection Date | 05/01/2018 |
| Survey held at | WOON MENG MOTOR PTE LTD 50 BUKIT BATOK ST 23 #01-06 MIDVIEW BUILDING SINGAPORE 659578 | | |

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: | 6 Working Days |
|-------------------------------------|----------------|



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBF 4487Y

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----------------------------|--------------------------------------|----------------------|---------------------------|-------------------|
| REPLACEMENT OF PARTS | | | | |
| 1 | REAR BUMPER | DEFORMED | 650.40 | 650.40 |
| 1 | REAR TAILGATE N/S | BENT | 1,545.40 | 1,545.40 |
| 1 | REAR TAILGATE OUTER HANDLE N/S | DEFORMED | 351.50 | 351.50 |
| 1 | REAR TAILGATE INNER TRIM N/S | NOT NECESSARY | 242.00 | - |
| 1 | REAR TAILGATE O/S | BENT | 1,053.00 | 1,053.00 |
| | LESS 30% DISCOUNT | | -1,152.69 | -1,080.09 |
| | | | 2,689.61 | 2,520.21 |
| NETT ITEMS | | | | |
| 1 | DCI (N) | NECESSARY | 155.90 | 155.90 |
| 2 | REAR BUMPER RETAINER @\$35.20 (N) | NECESSARY | 70.40 | 70.40 |
| 2 | REAR BUMPER REFLECTOR @\$47.90 (N) | NOT NECESSARY | 95.80 | - |
| 1 | REAR END PANEL OUTER (N) | TO REPAIR SEE LABOUR | 178.40 | - |
| 1 | REAR END PANEL TOP GARNISH (N) | NOT NECESSARY | 70.20 | - |
| 2 | REAR TAILGATE HINGE N/S @\$99.00 (N) | TO REPAIR SEE LABOUR | 198.00 | - |
| 1 | REAR TAILGATE TOP LOCK N/S (N) | NOT NECESSARY | 99.00 | - |
| 1 | REAR TAILGATE LOWER LOCK N/S (N) | NOT NECESSARY | 99.00 | - |
| 1 | REAR EMBLEM (N) | NECESSARY | 71.00 | 71.00 |
| 1 | REAR NV200 (N) | NECESSARY | 155.90 | 155.90 |
| 1 | REAR RUBBER (N) | TWISTED | 82.60 | 82.60 |
| 2 | REAR TAILGATE HINGE O/S @\$99.00 (N) | TO REPAIR SEE LABOUR | 198.00 | - |
| 1 | REAR TAILGATE TOP LOCK O/S (N) | NOT NECESSARY | 99.00 | - |
| 1 | REAR TAILGATE LOWER LOCK O/S (N) | NOT NECESSARY | 99.00 | - |
| | LESS 10% DISCOUNT | | -167.22 | -53.58 |
| | | | 1,504.98 | 482.22 |
| SPECIAL NETT ITEMS | | | | |
| 1 | 6 PAX (SN) | NECESSARY | 15.00 | 15.00 |
| 1 | 70KM (SN) | NECESSARY | 15.00 | 15.00 |
| 1 | REAR SENSOR (SN) | NOT WORKING | 220.00 | 200.00 |
| 3 | REAR WINDSCREEN SEALANT (SN) | NECESSARY | 60.00 | 60.00 |
| 1 | TO NUMBERING LOGO (ADDITIONAL)(SN) | NECESSARY | 250.00 | 180.00 |
| | | | 560.00 | 470.00 |

Report Ref No. CS/SMO18000381/T1rd3n2



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Page No.:2 of 2

| Qty | Description of Parts | Condition | Estimate By Workshop (\$) | Our Adjusted (\$) |
|-----|---|-----------|---------------------------|-------------------|
| | LABOUR | | | |
| | TO REMOVE, REPLACE, REPAIR & INSTALL DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF REAR END PANEL OUTER, REAR TAILGATE HINGE N/S AND REAR TAILGATE HINGE O/S. | | 1,000.00 | 700.00 |
| | TO R&R REAR WINDSCREEN GLASS N/S. | | 120.00 | 120.00 |
| | TO R&R REAR WINDSCREEN GLASS O/S. | | 120.00 | 60.00 |
| | TO R&R WIRING AND LIGHTING. | | 60.00 | 30.00 |
| | TO PUTTY & SPRAY PAINTING. | | 1,000.00 | 700.00 |
| | | | 2,300.00 | 1,610.00 |
| | GRAND TOTAL | | 7,054.59 | 5,082.43 |
| | RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) | | | 4,000.00 |

Report Ref No. CS/SMO18000381/T1rd3n2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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