REF: cs/AGI1800136A/Avd3n2

Adrian

From: Albert Hong — ASSIGNMENT / Officer: AGI — Date/Time: 23/1/18 @ 10.58am

Estimated Cost:

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

To Inspect Vehicle No: SKN 8335C — Torque 5 — Insured: SJL 6078E — Tel: 6452 1457

at Workshop / at: 8 kaki Bukit Ave 4 # 01-49/50

Policy No:

Claim No: C10001301

Sum Insured: — Excess:

Make of Veh: — D.O.I.: 21/01/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS — 'wp' — 25/01/2018 @ After 11am

Date/Time: 12.55pm @ 23/1/18 — Person Contacted: Lynn — Vehicle IN / OUT

Date/Time	Action/Instruction (✓)	Estimate
	SKN8335C -X	
	SJL6078E -X	

26/3/18 Adrian confirmed LS $ 2000 CRed 10,767.43, 84%)

REF: AGR

ASSIGNMENT

From: Date: 25012018

Estimated Cost:

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

To Inspect Vehicle No: SKN 8335C

at Workshop m/s: Torque 5

of: Kaki Bukit

Insured:

Policy No.:

Claims No.:

Sum Insured: Excess:

(Client's Record)

Make of Veh:

After 11am

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKN8335C Yr Regn: 2007 Jan.

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

Make: Toyota Wish. c.c. 1794

Colour: Silver. A/C Insured / Std / NI / NA

Sp.Reading: 220791 T/Radio Insured / Std / NI / NA

Eng No.:

C/No.: ZNE10033218Y.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55R16.

R: 205/55R16.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Hi-fly.

Front		Rear	
R.Bal.	06 mm	R.Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	25/01/18

Survey held at: Torque 5.

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
	TP Budget Direct.

RECEIVED 04 APR 2018

Date/Time File Pass to?

1)

Date/Time File Return to?

2) 4/4- typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: —

Add Fee: ☐ Site Insp $ ☐ Interview $ ☐ Tech Insp $ ☐ Weekend $

Survey Fee:

Transcription:

$ + GST $

Photos

Others

TOTAL: 350

Report Format: TP

Lump Sum / I.B.I: $ 2000/-

Survey Department Check List (Case Handler)

Reference No. : CS/AGI/8001364/Avd3

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**.

		Y-Date	N-Date	Y-Date	N-Date
(1) Office Assign Form					
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 surveryor completed all required information.

(1) Assignment Form					
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	✓			
(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				

Check By: VERON (Case Handler) 4/4/18 (Date)

21/05/201

*C: Critical *N: Non-Critical

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

AUTO & GENERAL INSURANCE (S) PL

(BUDGET DIRECT INSURANCE)
190 CLEMENCEAU AVENUE #03-01
SINGAPORE SHOPPING CENTRESINGAPORE
239924

Ref : CS/AGI18001364/Avd3

Date : 23-01-2018

Code : AGI

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SJL 6078E	Veh. Inspected	SKN 8335C
	Policy No.		Coverage ($)	0.00
	Claim No.	C1000131	Excess ($)	0.00
	Assign From	ALBERT HONG	Assign Date	23/01/2018

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	21/01/2018	Inspection Date
	Survey held at	TORQUE 5 PTE LTD 8 KAKI BUKIT AVENUE 4 #01-50 PREMIER @ KAKI BUKIT SINGAPORE 415875	

5a. Remarks

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

Nivitha (LKK Auto)

From: Julie Mangubat <julie.m@budgetdirect.com.sg>
Sent: Tuesday, 23 January 2018 10:58 AM
To: 'SUR'; assignments@lkkauto.com
Cc: Albert Hong
Subject: FW: Accident Involving SKN8335C & SJL6078E on 21/01/2018 (PRE-REPAIR SURVEY REQUEST) | Claim ref: C10001301 ; Appoint LKK to do PRI Survey
Attachments: image001.emz; image012.wmz; SKN8335C-GIA REPORT.pdf

Hi Team

Please conduct PRI survey on without prejudice basis.
Please find attached TP SAS report.

Thank you,
Julie Mangubat
Executive, Claims

T +65 6540 2181
F +65 6725 0853
E Julie.m@budgetdirect.com.sg

Budget Direct insurance

Customer Care: +65 6221 2111
Claims: +65 6221 2199
Claims (Int.): +65 6540 2199

190 Clemenceau Avenue
#03-01, Singapore Shopping Centre
Singapore 239924
budgetdirect.com.sg

From: Torque 5 Assessment [mailto:assessment@torque5.com]
Sent: Tuesday, 23 January, 2018 10:39 AM
To: Motor Claims <motorclaims@budgetdirect.com.sg>
Cc: assessment@torque5.com; sam.chang@torque5.com; eric.lee@torque5.com; claims@torque5.com
Subject: Accident Involving SKN8335C & SJL6078E on 21/01/2018 (PRE-REPAIR SURVEY REQUEST)

Without Prejudice

Dear Sir/ Mdm,

We refer to the above matter.

We represent our client, Maric & Partners Pte Ltd ,to notify you of the aforesaid accident involving our client's vehicle SKN 8335 C and your insured's vehicle SJL 6078 E on 21/01/2018.

Please find enclose our client's GIA report for your necessary action.

This serves as a **NOTICE** that we are claiming against SJL 6078 E for damages, costs and disbursements.

Please let us know within **2 working days** from today, your client's and your intention to conduct a pre-repair survey of our client's vehicle, along with your list of at least **ten (10) motor surveyors.**

If we do not receive any reply from you within the stipulated timeline, we shall proceed to appoint our own surveyor and proceed with the necessary repair for our client's vehicle without further reference to your insured or you.

Premises for the Pre-repair inspection: 8 Kaki Bukit Ave 4 #01-49, Premier @ Kaki Bukit Singapore 415875
Contact Person: Stephanie Teo (9147 8841)
Contact Email: *assessment@torque5.com*

VEH IN (Date & Time) : **25/01/2018 11.00AM**

PRS ARRANGEMENT (Date & Time) : 23/01/2018 10.40AM

PRS ACKNOWLEDGEMENT

Appointed Surveyor (Name & Signature) :

Date & Time of Inspection :

Kindly cc a copy of this letter to your insured for his/her acknowledgement.

We look forward to hearing from you soon.

To avoid incurrence of any unnecessary cost on both our end, kindly confirm liability status within 7 days from this to minimize time wastage and incurrence of any unnecessary cost(s) on both our end, we seek your kind advice, within 7 days working days, on liability status for subject claim. If we do not hear from you within the stipulated period, we shall proceed with the purchase of your insured GIA report and this cost or any other cost incurred for confirmation of liability status shall be included in our LOD for reimbursement purpose.

TORQUE 5 GROUP

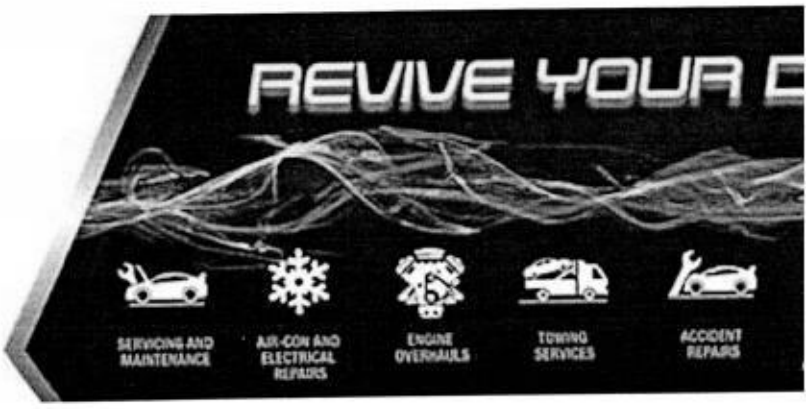
Warmest Regards,

Heng Lee Yi
Administrative Assistant | **Motor Claims Department**

Hotline (65) 6452 4457 | Fax (65) 6452 4584

Address 8 Kaki Bukit Ave 4, #01-49/50/51/52/53/54
Premier @ KB, Singapore 415875

www.torque5.com



Thursday
25/1/2018
11am

MSI118010962 / STA INSPECTION PTE LTD - Sin Ming
ENTRY DATE & TIME: 22/01/2018 17:47
SUBMITTED BY: Wong Lip Yong

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 witholding 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 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	22/01/2018 17:47
Date Of Accident	21/01/2018 09:30
Exact Location Of Accident	KJE NEAR EXIT 2
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKN8335C
Insured/Policyholder	
Name Of Registered Owner	MARIC & PARTNERS PTE. LTD.
Co Reg No	201620701N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96793810
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5082744693-01
Cover Note Number	
Driver	
Name of Driver	LEO TAI YU, DION
NRIC No	S9018582I
Date Of Birth	10/05/1990
Occupation	OUTDOOR
Date Of Driving Pass	09/03/2009
Driving Experience	8 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96793810
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 270 TAMPINES STREET 21 #03-167
Postcode	520270
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
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	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	**ROAD**: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , **POSTCODE:** 319194 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-2519999 - **FAX NO**: 63548749
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO POLICE REPORT

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	SJL6078E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	LEO TAI YU, DION
Approximate Age	27
Injuries Sustain	REFER TO REPORT
Injured person in which vehicle?	SKN8335C
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 270 TAMPINES STREET 21 #03-167
Postcode	520270

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.

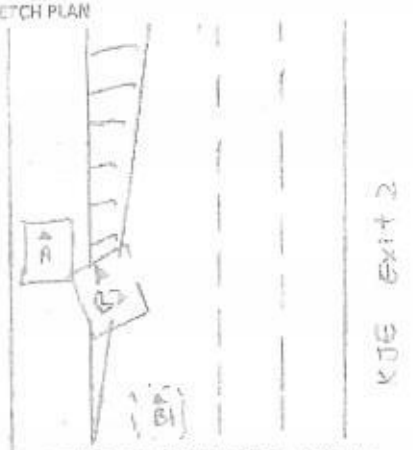
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



Vehicle A: SKN8335C

Vehicle B: SJL 6078E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Would like to state that my rims & tyres are damaged due to this accident too.

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 Crime Prevention's Signature
Names
NRIC/FIN No.:

SINGAPORE POLICE FORCE

Police Station Of Origin
Toa Payoh N.P.C.
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319196
Tel No 1800-2519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made	Vide Report No	Station Diary No
21/01/2018 15:02		102

Informant's Particulars

Name of Informant LEO TAI YU DION			Address APT BLK 270 TAMPINES STREET 21 #03-167 SINGAPORE 520270	
ID Type / ID No NRIC NO / S9018582I			Contact No Home/Office	Mobile 96793810
Nationality SINGAPORE CITIZEN			Email	
Sex Male	Age 27	Date of Birth 10/05/1990	Type of Informant Driver	
Race Chinese			Language English	Institution / School Name
Occupation DRIVER			Driving Licence Information Class 3	Date of Expiry

General Information of the Accident

Type of Accident	Injury	Drink Drive	Date/Time of Accident	Type of Location
	Others	No	21/01/2018 09:30	Bend

Location
Along Road 1
KRANJI EXPRESSWAY

Along Kranji Expressway, before Bukit Panjang Exit

Weather	Road Surface	Road Speed Limit
Clear	Dry	
Traffic Flow One Way	Traffic Control Not Controlled	Traffic Volume Light
Type of Collision Between Moving Vehicles - Side Swipe Same Direction		Anyone conveyed by ambulance No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SJL6078E	Car	TOYOTA	WISH 1.8 AUTO	Grey	Slightly Damaged	1
SKN8338C	Car	TOYOTA	WISH 1.8 A	Grey	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved No
No. of Pedestrians Injured NIL Use of Pedestrian Crossing N.A.

SINGAPORE POLICE FORCE

T/20180121/2055

2 of 3

Police Station Of Origin
Toa Payoh N.P.C.
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No. 1800-2519999

CONTINUATION OF REPORT

Report No. T/20180121/2055

Driver			
Name	ANNAPOORNA PRASAD	ID No	S2652922J
Related Vehicle	SJL6078E (Car)	Contact No	91057749
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	LEO TAI YU, DION	ID No	S9018582I
Related Vehicle	SKN8335C (Car)	Contact No	96793610
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	21/01/2018	Date Discharge	21/01/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 21/01/18 at about 0830hrs, I was travelling alone in my vehicle bearing registration no. SKN8335C along Kranji Expressway, at Bukit Panjang Exit. There were 4 lanes in total, and I was travelling on the fourth lane, counting from the right. There was a bend ahead and a road divider (white markings on the ground) at the point in time, and the lane I am travelling on was going to split into two lanes. It was then another vehicle bearing SJL6078E that was travelling on the third lane changed lanes abruptly into my lane while also crossing over the road divider, and it had side swiped against the right side of my vehicle.

Subsequently, we stopped our vehicles one side after the bend to see if anyone requires medical attention and to inspect our vehicle damages. We exchanged our particulars and left the scene afterwhich. I wish to state that I do not have a camera installed in my vehicle. I felt pains on the back of the neck and my lower back, as such I went to see the doctor and was given 5 days of MC.

SINGAPORE POLICE FORCE

T0218012J/2015

3 of 3

Police Station Of Origin
Toa Payoh N P C
93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194
Tel No 1800-2519999

Report No T0218012J/2015

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 65474865 stating the **report number** as reference.

Signature Of Officer Recording The Report
E /
Spt 2 MARCUS TEO

Signature Of Informant

Signature Of Interpreter
Not applicable

Date/Time
21/01/2015 16:02

Officer In Charge Of Case
TP / AET /
SSI GOH GEOK LIN
Contact No 6541 [illegible]

Classification Of Case
SI. 168

Authentication Status
NIL

SINGAPORE POLICE FORCE

SIGNATURE

Torque 5 Pte Ltd
No.8 Kaki Bukit Ave 4, Premier @ Kaki Bukit, #01-50 Singapore 415875
Tel: +65 6452 4457 | Fax: +65 6452 4584 | Email: enquiry@torque5.com
Co. & GST Reg. No.: 201313221G

TP Budget Direct.
Veron.

ESTIMATION REPORT

Vehicle No : SKN8335C
Make & Model : TOYOTA,WISH 1.8 A,ZNE100332184
Year of Manufacture : 2006

Estimation No. : E18010072
DOA : 21/01/2018

No	Description	Qty	U/P	Amt
	Section: List Items			
1	REAR BUMPER Rpl	1.00	442.00	442.00
2	REAR BUMPER CLIPS	10.00	5.00	50.00
3	REAR BUMPER RETAINER (R)	1.00	87.00	87.00
4	REAR BUMPER BRACKET (R)	1.00	70.00	70.00
5	REAR FENDER (R) Rpl	1.00	1,070.20	1,070.20
6	REAR FENDER COWLING (R)	1.00	92.75	92.75
7	REAR FENDER COWLING CLIPS (R)	10.00	5.00	50.00
8	REAR FENDER INNER TRIM (R)	1.00	822.00	822.00
9	REAR FENDER INNER TRIM CLIPS (R)	10.00	5.00	50.00
10	REAR DOOR (R) Dented	1.00	1,081.67	1,081.67
11	REAR DOOR HINGE-UP (R)	1.00	111.90	111.90
12	REAR DOOR HINGE-DOWN (R)	1.00	111.90	111.90
13	REAR DOOR CHECKER (R)	1.00	196.40	196.40
14	REAR DOOR WEATHER STRIP (R)	1.00	178.60	178.60
15	REAR DOOR INNER WEATHER STRIP (R)	1.00	364.00	364.00
16	REAR DOOR LOCK (R)	1.00	562.10	562.10
17	REAR DOOR INNER TRIM (R)	1.00	481.30	481.30
18	REAR DOOR INNER TRIM CLIPS (R)	10.00	5.00	50.00
19	REAR DOOR WINDOW MOULDING (R)	1.00	155.20	155.20
20	REAR DOOR POWER WINDOW MOTOR (R)	1.00	281.60	281.60
21	REAR DOOR POWER WINDOW GEAR (R)	1.00	365.80	365.80
22	ROCKER PANEL (R)	1.00	781.60	781.60
23	REAR ABSORBER (R)	1.00	255.90	255.90
24	REAR KNUCKLE (R)	1.00	381.20	381.20
25	REAR BEARING (R)	1.00	551.85	551.85

Continue on next page...

Torque 5 Pte Ltd
No.8 Kaki Bukit Ave 4, Premier @ Kaki Bukit, #01-50 Singapore 415875
Tel: +65 6452 4457 | Fax: +65 6452 4584 | Email: enquiry@torque5.com
Co. & GST Reg. No.: 201313221G

ESTIMATION REPORT

Vehicle No : SKN8335C
Make & Model : TOYOTA,WISH 1.8 A,ZNE100332184
Year of Manufacture : 2006

Estimation No. : E18010072
DOA : 21/01/2018

No	Description	Qty	U/P	Amt
26	REAR LOWER ARM (R)	1.00	599.10	599.10
27	REAR AXLE	1.00	1,472.50	1,472.50

126027
94520

Amt S$ 10,716.57
Discount (25.00%) S$ 999.99
Subtotal S$ 8,037.43

Section: Special Nett Items

28	REAR FENDER SEALANT	1.00	80.00	80.00
29	REAR RIM (R)	1.00	900.00	900.00
30	REAR TYRE (R)	1.00	500.00	500.00

450

Amt S$ 1,480.00
Discount (0.00%) S$ 0.00
Subtotal S$ 1,480.00

Section: Labour Items

31	TO R&R ACCIDENT AFFECTED AREAS	1.00	1,400.00	1,400.00
32	TO PUTTY AND RESPRAY ACCIDENT AFFECTED AREAS	1.00	1,250.00	1,250.00
33	TO RUST PROOF ACCIDENT AFFECTED AREAS	1.00	60.00	60.00
34	TO R&R REAR DOOR MECHANISM	1.00	80.00	80.00
35	TO R&R REAR UNDERCARRIAGE	1.00	280.00	280.00
36	TO DO WHEEL ALIGNMENT	1.00	120.00	120.00
37	TO CHECK WATER SEEPAGE	1.00	60.00	60.00

1140

total: 1535.20.
+ 15.2K.

Amt S$ 3,250.00
Discount (0.00%) S$ 0.00
Subtotal S$ 3,250.00

Adrian Liu
H/S 25/01/18.
04 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:

List Items Subtotal S$ 8,037.43
Special Nett Items Subtotal S$ 1,480.00
Labour Items Subtotal S$ 3,250.00
Total S$ 12,767.43

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

AUTO & GENERAL INSURANCE (S) PL

(BUDGET DIRECT INSURANCE)
190 CLEMENCEAU AVENUE #03-01
SINGAPORE SHOPPING CENTRESINGAPORE
239924

Ref : CS/AGI18001364/Avd3n2

Date : 06-04-2018

Code : AGI

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SJL 6078E	Veh. Inspected	SKN 8335C
	Policy No.		Coverage ($)	0.00
	Claim No.	C10001301	Excess ($)	0.00
	Assign From	ALBERT HONG	Assign Date	23/01/2018

2. Vehicle Particulars & Condition

	Make & Model	TOYOTA WISH	c.c	1794
	Engine No.	HIDDEN	Year of Reg.	2007
	Chassis No.	ZNE100332184	Colour	SILVER
	Odometer	220791	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		

3. Conditions of Tyres

		Size	Make	Balance
	R/H Front Tyre	205/55 R16	HIFLY	6 mm
	L/H Front Tyre	205/55 R16	HIFLY	6 mm
	R/H Rear Tyre	205/55 R16	HIFLY	6 mm
	L/H Rear Tyre	205/55 R16	HIFLY	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	21/01/2018	Inspection Date	25/01/2018
	Survey held at	TORQUE 5 PTE LTD 8 KAKI BUKIT AVENUE 4 #01-50 PREMIER @ KAKI BUKIT SINGAPORE 415875		

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: **4 Working Days**

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKN 8335C

Qty	Description of Parts	Condition	Estimate By Workshop ($)	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR BUMPER	TO REPAIR SEE LABOUR	442.00	-
10	REAR BUMPER CLIPS @$5.00	NOT NECESSARY	50.00	-
1	REAR BUMPER RETAINER (R)	NOT NECESSARY	87.00	-
1	REAR BUMPER BRACKET (R)	NOT NECESSARY	70.00	-
1	REAR FENDER (R)	TO REPAIR SEE LABOUR	1,070.20	-
1	REAR FENDER COWLING (R)	NOT NECESSARY	92.75	-
10	REAR FENDER COWLING CLIPS (R) @$5.00	NOT NECESSARY	50.00	-
1	REAR FENDER INNER TRIM (R)	NOT NECESSARY	822.00	-
10	REAR FENDER INNER TRIM CLIPS (R) @$5.00	NOT NECESSARY	50.00	-
1	REAR DOOR (R)	DENTED	1,081.67	1,081.67
1	REAR DOOR HINGE-UP (R)	NOT NECESSARY	111.90	-
1	REAR DOOR HINGE-DOWN (R)	NOT NECESSARY	111.90	-
1	REAR DOOR CHECKER (R)	NOT NECESSARY	196.40	-
1	REAR DOOW WEATHER STRIP (R)	NECESSARY	178.60	178.60
1	REAR DOOW INNER WEATHER STRIP (R)	NOT NECESSARY	364.00	-
1	REAR DOOR LOCK (R)	NOT NECESSARY	562.10	-
1	REAR DOOR INNER TRIM (R)	NOT NECESSARY	481.30	-
10	REAR DOOR INNER TRIM CLIPS (R) @$5.00	NOT NECESSARY	50.00	-
1	REAR DOOR WINDOW MOULDING (R)	NOT NECESSARY	155.20	-
1	REAR DOOR POWER WINDOW MOTOR (R)	NOT NECESSARY	281.60	-
1	REAR DOOR POWER WINDOW GEAR (R)	NOT NECESSARY	365.80	-
1	ROCKER PANEL (R)	NOT NECESSARY	781.60	-
1	REAR ABSORBER (R)	NOT NECESSARY	255.90	-
1	REAR KNUCKLE (R)	NOT NECESSARY	381.20	-
1	REAR BEARING (R)	NOT NECESSARY	551.85	-
1	REAR LOWER ARM (R)	NOT NECESSARY	599.10	-
1	REAR AXLE	NOT NECESSARY	1,472.50	-
	LESS 25% DISCOUNT		-2,679.14	-315.07
			8,037.43	945.20
	SPECIAL NETT ITEMS			
1	REAR FENDER SEALANT (SN)	NOT NECESSARY	80.00	-
1	REAR RIM (R)(SN)	CUT	900.00	450.00

Report Ref No. CS/AGI18001364/Avd3n2

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TEL: 6256 3561 FAX: 6256 4315

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

Qty	Description of Parts	Condition	Estimate By Workshop ($)	Our Adjusted ($)
1	REAR TYRE (R)(SN)	NOT NECESSARY	500.00	-
			1,480.00	450.00
	LABOUR			
	TO R&R ACCIDENT AFFECTED AREAS.INCLUSIVE OF THE REPAIR OF REAR BUMPER AND REAR FENDER (R).		1,400.00	350.00
	TO PUTTY AND RESPRAY ACCIDENT AFFECTED AREAS.		1,250.00	600.00
	TO RUST PROOF ACCIDENT AFFECTED AREAS.		60.00	30.00
	TO R&R REAR DOOR MECHANISM.		80.00	80.00
	TO R&R REAR UNDERCARRIAGE.	NOT NECESSARY	280.00	-
	TO DO WHEEL ALIGNMENT.		120.00	80.00
	TO CHECK WATER SEEPAGE.	NOT NECESSARY	60.00	-
			3,250.00	1,140.00
	GRAND TOTAL		**12,767.43**	**2,535.20**
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**2,000.00**

Report Ref No. CS/AGI18001364/Avd3n2

ADRIAN LING WAI PING

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

Licensed Appraiser