

INS. CASE OWNER:

stacy

CC4

AXA1800

3233, m

LKK:  
IDAC:

Surveyor:

mf

DOI:

ASSIGNMENT

26/1/18

Date / Time:

20/1/18

Registered in Meriton:

Pre-assign / CCU / FTE



Insured Vehicle No.:

62 5374T

Name of Insured:

SONYUEN TRADING ENTERPRISE PTE

Insured Tel No.:

HP:

D.O.A:

12/01/18

Excess Sec II :\$5

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age: WPM UMIN

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

58M0047 12/1/18

Policy No.:

VIA/PIR84392

Make / Model:

TOYOTA

Place of Accident:

MURPHERSON RD

OI GIA REPORT YES / NO ; TP GIA REPORT YES / NO

Insured Liability:

%

Final ? Yes / No

SU 190000



INSRS:

WSP:

Tel:

Liability:

RMKS:

WSP  
Liability

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

20/1/18  
ParkerSU 190000-X  
Smart claim  
OIR

62 5374T-X

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

58M 23/3/18

After call ltr to OI:

12/3/18 + 15:50

CALLED OIR COMPANY CONFIRMED ACCIDENT. OIR REVERSED AND

HIT PARKED TP. INFORMED TO CLAIM AGENT TO SORT AND

ADVISE ABOUT NO ISSUE.

FINAL WSP LIABILITY CLARIFIED

14/10/18 TP CHANGED WSP AGENT TO UNQUOTE TO HANDLE

RECEIVED 2018

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:

Email

Call

Final Liability:

% 100

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

23

If NO or B 28, Ass. Lia:

Repair Cost:

S\$

OIR REVERSED AND PARKED TP.

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(S

x

days)

Loss of Income (LOI):

S\$

(S

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost:

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

250

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

COPY SENT  
14/10/18

REF: CC4 / ASM18003233 / Geb3

Special Instruction:

45: \$ 6200.00

*Third Parties:*

Claimant:

### Surveyor:

### Workshop:

## Auto Performance Appraisal

Sze Kung

ASSIGNMENT (Office)

From (Person): Heng Xinyi of Seah Ung Date/Time: 27/09/2018  
 Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD(TP Re-inspection) / Evaluation

To Inspect Vehicle No: 9LL 9500J Insured: GZ 5374T

at Workshop m/s Sze Kung Automobile Tel: 9752 5311

of 10 AMK Ind Park 2A #03-17

Policy No: \_\_\_\_\_ Claim No: 18.011406 PD-D

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 12032018

(Client's Record)

12.10.2018 (Friday) @ 5pm

H.O.D. Endorsement/Date: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN / OUT \_\_\_\_\_

Date/Time: 12/1 Confirmed with 12/1 Final Fig 12/1, 12/1 days (Red S 12/1 / 12/1 %; Original 4 days)

Date/Time: 12/10 Submit Final Fig 1300, 3 days (Red \$ / %; Original days)

[illegible]

Para(1) : Parts found not replaced	(To highlight <i>R or UB, LR, Etc</i> )
------------------------------------	---

**Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)**

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value : \_\_\_\_\_

Inspected/  
Evaluated by:

*Fee Charged:*

### Basic & Add

Transport

## Photos

Others

Total

Date: \_\_\_\_\_

1) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

3) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

5) Date/Time \_\_\_\_\_ File Pass to \_\_\_\_\_

2) Date/Time

4) Date/Time

6) Date/Time

File Return to

File Return to

File Return to

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop n/s: Chg E BR  
 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.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: 3 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: SH95001 Yr Regn: APR 2014  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or

Make: Audi A6 G.C. 2995  
 Colour: WHITE A/C: Insured / Std / NI / NA  
 Sp. Reading: 102387 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: WAU 2ZZ4G2C N077000  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Order / Jammed / Leaked / Burnt or  
 Brake: Order / Jammed / Leaked / Burnt or  
 Modi: Nil / 6 Rim / STD A/Rim or  
 Tyre Size: F: 255/35/P17  
 R: \_\_\_\_\_

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

Front: 8 mm R/Bal: 8 mm  
 L/Bal: 8 mm L/Bal: 8 mm  
 D.O.A: 12/2/2018 D.O.I: 26/3/2018

Survey held at \_\_\_\_\_

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

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

Date / Time Action / Instruction

P/P: 7880 (RSD: 1125 58%)

RECEIVED 19 OCT 2018

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair: \_\_\_\_\_

1)

☐ : Final Report

Resurvey No. of Trip: \_\_\_\_\_

Date/Time, File Return to?

Survey Fee: \_\_\_\_\_

2)

Transportation: \_\_\_\_\_

Report Format :

Add Fee: ☐ : Site Insp (\$

) \$ + RS. \$

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

☐ : Interview (\$

) Photos

☐ : Tech. Invs (\$

) Other

☐ : Weekend (\$

)

TOTAL





# LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD		Ref : CC4/ASM18003233/eb3		
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811		Date : 20-02-2018		
		Code : ASM		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	GZ 5374T	Veh. Inspected	SLL 9500U	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	20/02/2018	
<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	12/02/2018	Inspection Date		
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 205 BRADDELL ROAD Blk C, 3rd Floor SINGAPORE 579701.			
<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.				



205 Braddell Road S(579701)

**ACCIDENT REPAIR ESTIMATES**

Our Ref:

Type of Claim : TPVehicle No. : SLL9500JMake & Model : AUDI A6 QUATTRO 3.0AYear of Manufacture : 2014Chassis No. : WAUZZZ4G2CN077000Ins Company : AXA / AXA

Engine No. : \_\_\_\_\_

Excess : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Date of Accident : 12-Feb-18Time of Accident : 21:40

Suggested Days of Repair : \_\_\_\_\_

In-house Vehicle Assessor**Repair Estimates**Case Owner : ROHANI

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

Parts (a) Cost / List Price Items \$-

Contact No

Plus/Less 5% \$-63837466 – Patrick  
[patricktia@sparkcarcare.com](mailto:patricktia@sparkcarcare.com)Total of Cost / List \$-63837890 – Eric  
[ericppg@sparkcarcare.com](mailto:ericppg@sparkcarcare.com)

63838115 – WILLIAM

(b) Nett Price Items \$-

63837362 – EZEL

63837656 - Ngo  
[ngotw@edge.com.sg](mailto:ngotw@edge.com.sg)

Less \_\_\_\_\_

Total of Nett Item \_\_\_\_\_

63837730 – Brenda Ng

(c) Special Nett Items \$65.00Total Parts Cost (Appendix A) \$65.00Labour (Appendix B) \$1,890.00Total Repair Cost \$1,955.00*The above total will be subjected to 7% G.S.T.*

Name of Surveyor : \_\_\_\_\_

Company : \_\_\_\_\_

Survey conducted on : \_\_\_\_\_ at \_\_\_\_\_

Remarks By Surveyor

(a) The repair of this vehicle is authorized / is not authorized until further notice.

(b) Recommended Days of Repair : \_\_\_\_\_ day(s)

(c) Resurvey : Required / Not Required

(d) Excess \$ \_\_\_\_\_

(e) Signature of surveyor : \_\_\_\_\_ Date: \_\_\_\_\_

## Spark Car Care

ComfortDelGro Engineering Pte Ltd

205 Braddell Road S (579701)

Tel: 63837168 / 63837466 Fax: 62815767

### Spare Parts

Vehicle No : <u>SLL9500J</u>	Case Owner : <u>ROHANI</u>
Make & Model : <u>AUDI A6 QUATTRO 3.0A</u>	Year Manufacture : <u>2014</u>
Chassis No : <u>WAUZZZ4G2CN077000</u>	Engine No : <u>0</u>
Sales Order : _____	Supplier : _____
Order By : _____	Type of Claim : <u>TP</u>

S/No	Part Description	QTY	Cost Price	List Price	Nett Price	S/N	Disposition By Surveyor
1	Front number plate with casing	1				\$65.00	
2	Front number plate garnish	1					
3	Radiator grille	1					
4	Audi Logo	1					
5	Radiator grille emblem - RS6	1					
6	Radiator grille emblem - Quattro	1					
7	Radiator lower grille	1					
8	Lower Radiator grille Emblem - Quattro	1					
9	Bonnet	1					
10	Bonnet seal	1					
11	Bonnet catch	1					
12	Bonnet lock	1					
13	Headlamp LH	1					
14	Headlamp panel LH	1					
15	Front support panel	1					
16	Front support panel top cover	1					
17	Front support panel top cover clip	6					
18	Front bumper	1					
19	Front bumper clip	10					
20	Front bumper reinforcement	1					
21	Front bumper side retainer LH	1					
22	Front bumper side retainer RH	1					
23	Front bumper chrome moulding LH	1					
24	Front bumper chrome moulding RH	1					
25	Parking Sensor Frt LH	1					
26	Front LH Fog Lamp Cover	1					
27	0	0					
28	0	0					
29	0	0					
30	0	0					

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

**ComfortDelGro Engineering Pte Ltd**

Tel: 63837168 / 63837466 Fax: 62815767

Year of Manufacture : 2014

**Acknowledged by Repairer**  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

*Note: The above estimate of repair is based on visual assessment of the external affected areas. Any additional damages observed during the course of repair will be quote accordingly as a supplementary.*



## Nivitha (LKK Auto)

---

**From:** Xin Yi <xinyi@seahong.com.sg>  
**Sent:** Thursday, 27 September 2018 12:29 PM  
**To:** 'Catherine Chong (LKK Auto)'  
**Cc:** 'Chee Kiong'; samson@seahong.com.sg; amanda@seahong.com.sg  
**Subject:** SLL 9500J [Our file ref: 18.24408 PD-O]  
**Attachments:** TP LOD.pdf

Dear Catherine,

<b>CLAIMANT :</b>	<b>TEOH CHE CHUNG ELVIN</b>
<b>VEHICLE NUMBER :</b>	<b>SLL 9500J</b>
<b>ALLEGED ACCIDENT DATE :</b>	<b>12 FEBRUARY 2018</b>
<b>AXA VEHICLE NUMBER :</b>	<b>GZ 5374T</b>

We act for AXA Insurance Pte Ltd for the above matter.

We also refer to the tele-conversation between our goodselves in which we confirm your surveyor can attend the RI.

Kindly attend the re-inspection of motor vehicle no. SLL 9500J, details of which are as follows:-

Date	:	12 October 2018 (Friday)
Time	:	5.00pm
Place	:	10 Ang Mo Kio Industrial Park 2A #03-17/09 Ang Mo Kio Auto Point, Singapore 568047
Contact Person	:	Mr Elvin Teoh
Contact no.	:	9752 5811

Please find attached the Claimant's LOD for your attention. Thanks!

Thanks & Best Regards

**Heng Xinyi**

(Secretary to Mr Tan Chee Kiong)

Seah Ong & Partners LLP

36 Robinson Road

#12-03 City House

Singapore 068877

Tel: 6536 5369

Fax: 6536 5811

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Your Ref:

Our Ref: YSY/18.020742/ec

21 June 2018



Email: [enquiry@ascentsialawcorp.com](mailto:enquiry@ascentsialawcorp.com)  
Website: [www.ascentsialawcorp.com](http://www.ascentsialawcorp.com)  
(Service of Court documents by fax not accepted)

## SONGLILAI TRADING ENTERPRISE PTE LTD

171 Kampong Ampat  
#01-04 Ka Foodlink  
Singapore 368330

## CERTIFICATE OF POSTING

61167558



Dear Sirs

## ACCIDENT INVOLVING SLL 9500J & GZ 5374T ALONG MACPHERSON ROAD AT CASUALRINA CURRY HOUSE ON 12 FEBRUARY 2018

We refer to the above matter.

We act for Mr Teoh Che Chung Elvin who has instructed us to claim damages against you in connection with the above-mentioned accident involving our client's motor vehicle bearing registration number SLL 9500J ("our client's vehicle") and GZ 5374T ("your insured's vehicle") driven by you and/or by your servant agent and/or employee and/or under your instructions or directions.

The accident was caused by the negligent driving and/or management of your vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

a.	Cost of Repair	S\$ 6,200.00
b.	Loss of Use (\$120.00 x 4 days)	S\$ 480.00
c.	Surveyor's inspection fees	S\$ 603.00
d.	LTA's search fees	S\$ 7.49
e.	Photocopying, facsimile, courier and other incidentals	S\$ 50.00
Total		<u>S\$ 7,340.49</u>

A copy of each of the following documents is enclosed:

- Invoice No. 104001 from Sze Kang Automobile Spraying Services;
- Invoice No. APA18001559 from Auto Performance Appraisal dated 18 May 2018;
- Vehicle Inspection Report from Auto Performance Appraisal;
- Singapore Accident Statement; and
- 38 coloured photographs.

Directors Kenny Khoo • Leong Why Kong • Yip Shue Yin Legal Consultant Thomas Au  
Associates Chiang Wan Ting • Clarisse Khoo • Ong Li Ling • Tan Choon Hiang

Confidentiality note: The contents herein are strictly meant for the addressee only and may contain privileged communications. If you are not the intended recipient, please either immediately return this document to us at our costs or destroy this document.

Our Ref: YSY/18.020742/ec  
21 June 2018  
Songlilai Trading Enterprise Pte Ltd  
• Page 2 of 2


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If there is settlement at this stage, we are asking for costs contribution of S\$700.00.

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer. Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within **14 days** of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.

Please note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully,



Yip Shee Yin  
Writer's DID: 6327 5777

Enc.

cc. **AXA INSURANCE PTE LTD**  
8 Shenton Way #27-02  
AXA Tower  
Singapore 068811  
(Motor Claim Department)

**BY HAND**

# SZE KANG AUTOMOBILE SPRAYING SERVICES

AMK Auto Point

Block 10, Ang Mo Kio Industrial Park 2A, #03-17, Singapore 568047

Telephone: 6481 2712 Fax: 6481 8694

## INVOICE

TO: **Officer-in-charge**

Date: 18/5/2018

Invoice no. : 104001  
Vehicle no. : SLL9500J  
Make / Model : AUDI

---

Finalised Amount: \$6,200.00

Total payable amount: \$6,200.00

**Anthony Goh**

---

SZE KANG AUTOMOBILE SPRAYING SERVICES

# AUTO PERFORMANCE APPRAISAL

*APA*

## TAX INVOICE

Teoh Che Chung Elvin  
C/O Sze Kang Automobile Spraying Services  
10 Ang Mo Kio Ind. Park 2A  
Ang Mo Kio Auto Point #03-17/09  
Singapore 568047

INVOICE NO : APA18001559

DATE : 18/05/2018

VEHICLE NO : SLL9500J  
JOB REFERENCE NO : 18/001659  
ACCIDENT DATE : 12/02/2018  
SURVEY DATE : 10/05/2018

### DESCRIPTION

### AMOUNT

Survey Fees Inclusive Of Transportation	\$565.00
Photographs (\$1) Per Copies : 38	\$38.00

**TOTAL AMOUNT : \$603.00**

#### Notes :

All cheque payment should be "Crossed" and made payable to "Auto Performance Appraisal"

Auto Performance Appraisal



Blk 273A Bishan Street 24 #10-106, Singapore 571273  
Hp : 94301592 Email : autoperformancelek@gmail.com  
Co.Reg. 53223011J

# AUTO PERFORMANCE APPRAISAL

APA

VEHICLE SURVEY REPORTS																																
<p>Teoh Che Chung Elvin C/O Sze Kang Automobile Spraying Services 10 Ang Mo Kio Ind. Park 2A Ang Mo Kio Auto Point #03-17/09 Singapore 568047</p>																																
1	<b>Reference</b> Job Reference No : 18/001659 Claim No : - Claim Type : Third Party Accident Date : 12/02/2018 Survey Date : 10/05/2018 Survey Report Date : 18/05/2018																															
2	<b>Particulars Of Vehicle</b> Vehicle Registration No : SLL9500J Make & Model : Audi A6 Quattro 3.0 A Vehicle Registration Date : 29/04/2014 Chassis No : WAUZZZ4G2CN077000 Engine No : Blocked Colour : White																															
3	<b>Condition Of Vehicle And Tyres</b> <table border="1"><thead><tr><th><u>Mileage (KM)</u></th><th><u>Brakes</u></th><th><u>Steering</u></th><th><u>Modification</u></th></tr></thead><tbody><tr><td>104511</td><td>Serviceable</td><td>Serviceable</td><td>None</td></tr><tr><th><u>Tyres</u></th><th><u>Make</u></th><th><u>Size</u></th><th><u>Balance (MM)</u></th></tr><tr><td>Front RHS</td><td>Goodyear</td><td>255/35R20</td><td>5</td></tr><tr><td>Front LHS</td><td>Goodyear</td><td>255/35R20</td><td>5</td></tr><tr><td>Rear RHS</td><td>Goodyear</td><td>255/35R20</td><td>6</td></tr><tr><td>Rear LHS</td><td>Goodyear</td><td>255/35R20</td><td>6</td></tr></tbody></table>				<u>Mileage (KM)</u>	<u>Brakes</u>	<u>Steering</u>	<u>Modification</u>	104511	Serviceable	Serviceable	None	<u>Tyres</u>	<u>Make</u>	<u>Size</u>	<u>Balance (MM)</u>	Front RHS	Goodyear	255/35R20	5	Front LHS	Goodyear	255/35R20	5	Rear RHS	Goodyear	255/35R20	6	Rear LHS	Goodyear	255/35R20	6
<u>Mileage (KM)</u>	<u>Brakes</u>	<u>Steering</u>	<u>Modification</u>																													
104511	Serviceable	Serviceable	None																													
<u>Tyres</u>	<u>Make</u>	<u>Size</u>	<u>Balance (MM)</u>																													
Front RHS	Goodyear	255/35R20	5																													
Front LHS	Goodyear	255/35R20	5																													
Rear RHS	Goodyear	255/35R20	6																													
Rear LHS	Goodyear	255/35R20	6																													
4	<b>Description Of Damages</b> The vehicle sustained damages at frontal portion. (For information of damages please refer to Parts/Labour/Photographs attached)																															
5	<b>Instruction</b> This survey was conducted entirely on a "WITHOUT PREJUDICE" basis, and we have not authorised any repair.																															

# AUTO PERFORMANCE APPRAISAL

## Vehicle Assessment Reports

Annex A

Ref No : 18/001659

### Damage And Repair Cost Adjustment

<u>S/No</u>	<u>Qty</u>	<u>Parts Description</u>	<u>Comments/condition</u>	<u>Workshop Estimate (\$)</u>	<u>Our Assessment (\$)</u>
<u>List Items</u>					
1	1	Front bumper	To repair	1,457.50	-
2	1	Front grille assy	Broken/cut	533.17	533.17
3	1	Front grille camera	Broken/malfunction	540.00	540.00 200(SW)
4	2	Headlamp	LH cut & broken/RH reuse	5,400.00	2,700.00 X NH
5	1	Front bonnet	Badly dented & bent	3,058.00	X 3,058.00 Repair
				10,988.67	6,831.17
Less discount 5%				549.43	341.56
Total :				10,439.24	6,489.61
<u>Special Nett Items</u>					
6	1	Front number plate	Reuse	45.00	-
Total :				45.00	0.00
Total Spare Parts :				10,484.24	6,489.61

533.17  
50% = 506.51  
290

# AUTO PERFORMANCE APPRAISAL

## Vehicle Assessment Reports

Annex B

Ref No : 18/001659

### Damage And Repair Cost Adjustment

<u>Items</u>	<u>Job Description</u>	<u>Workshop Estimate (\$)</u>	<u>Adjusted Costs (\$)</u>
1	To remove, jack out, straighten, panel beating, align and renew replaced parts.	1,000.00	600.00 400
2	To putty and respray painting on affected areas.	800.00	600.00 500
3	To check wirings and lightings.	50.00	30.00 /
4	To supplied and applied anti rust treatments.	50.00	30.00 x NN
Total Labour :		1,900.00	1,260.00 830
Total Spare Parts :		10,484.24	6,489.61
Total Labour :		1,900.00	1,260.00
Total Repair Costs :		12,384.24	7,749.61

#### Assessor's Recommendation

Repairer Estimate : 12,384.24  
Our Adjustment : 7,749.61

#### Remarks

The repairer has agreed to undertake the repair on a lump sum basis of \$6,200.00, with a repair period of 4 working days.

Surveyed By:



Lek Boon Hwee  
Automobile Appraiser

1636.51  
20% 1300



## 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 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	13/02/2018 17:15
Date Of Accident	12/02/2018 21:40
Exact Location Of Accident	MACPHERSON ROAD AT CASUALRINA CURRY HOUSE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL9500J
Insured/Policyholder	
Name Of Registered Owner	TEOH CHE CHUNG ELVIN
NRIC No	S1535996Z
Email Address	ELVINTEOH@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97300995
Alternative Phone No	OFFICE-97300995

### Vehicle Particulars

Manufacturer	AUDI
Model	AUDI A6 3.0T
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 CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA190203/1
Cover Note Number	

### Driver

Name of Driver	TEOH CHE CHUNG ELVIN
NRIC No	S1535996Z
Date Of Birth	30/07/1962
Occupation	INDOOR
Date Of Driving Pass	23/02/1980
Driving Experience	37 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97300995
Fax Number	
Contact Number	OFFICE-97300995
Email Address	ELVINTEOH@YAHOO.COM

Address	47 TAI KENG PLACE
Postcode	534350
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of Intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

**TP-REVERSED HIT MY FRONT VEHICLE**

#### 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	GZ5374T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WANG LIMIN
NRIC/Passport Number	G2869548P
Contact Number	83040614
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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 Authorized 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 reassess 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.
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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:

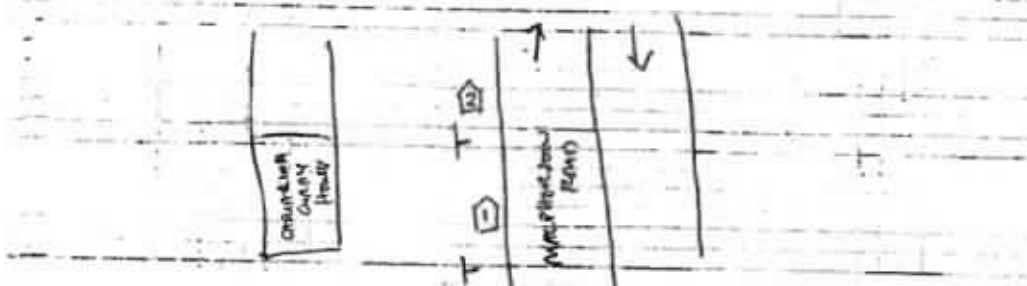
  
15/1/18  
12:18

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

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



## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

① 50C95003

② 6Z 5374T

- 1) Parked my vehicle in front of orangkay curry house for supper. Lot immediately in front of my vehicle was empty.
- 2) After completion of supper, I came out to retrieve my vehicle and 6Z 5374T was noted to have occupied the lot in front of my vehicle.
- 3) Guests sitting outside the curry house gestured & alerted me that the vehicle 6Z 5374T had reversed into my vehicle and had gone upstairs of the same block.
- 4) Upon checking my inner camera which confirm that the vehicle had indeed reversed into mine and scraping dents to the left side of the bonnet and scratched the left front bumper.
- 5) Approached the driver upstairs in his residence and he admitted to causing the accident.
- 6) Furthermore, he just started working for the new company and therefore was not eligible of a private insurance and intend to claim against his insurance.
- 7) His vehicle 6Z 5374T is registered to  
SONGLIA, TRADING ENTERPRISE SRT LTD  
291 KAMPONG AMPAT # 01-04 KA PADUKA (S) 368330

## DECLARATION

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

Policyholder's Signature

Date &amp; Time: 13/2/2018

14.15

Driver's Signature

(If driver is not the policyholder)

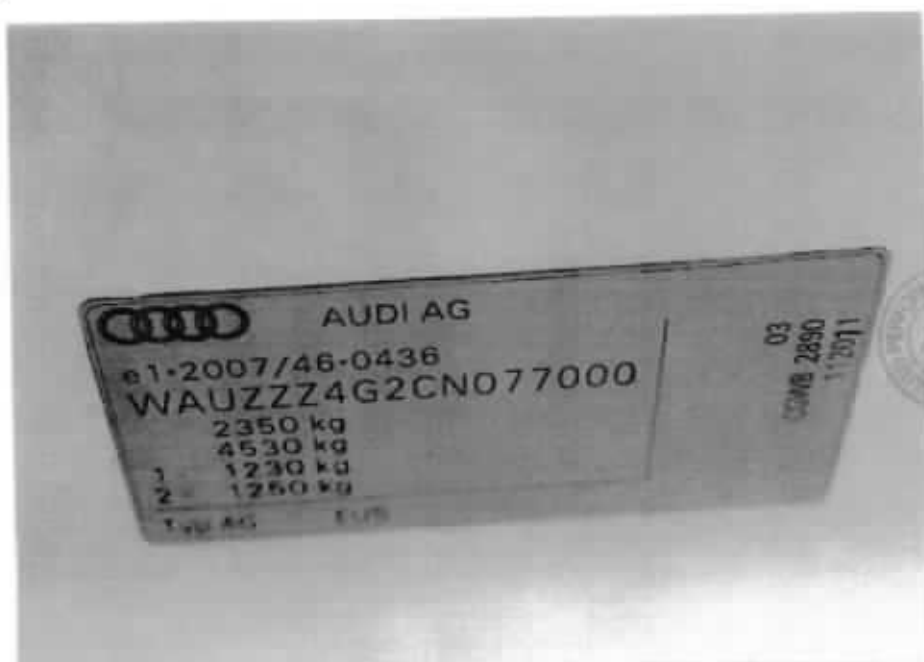
Date &amp; Time:

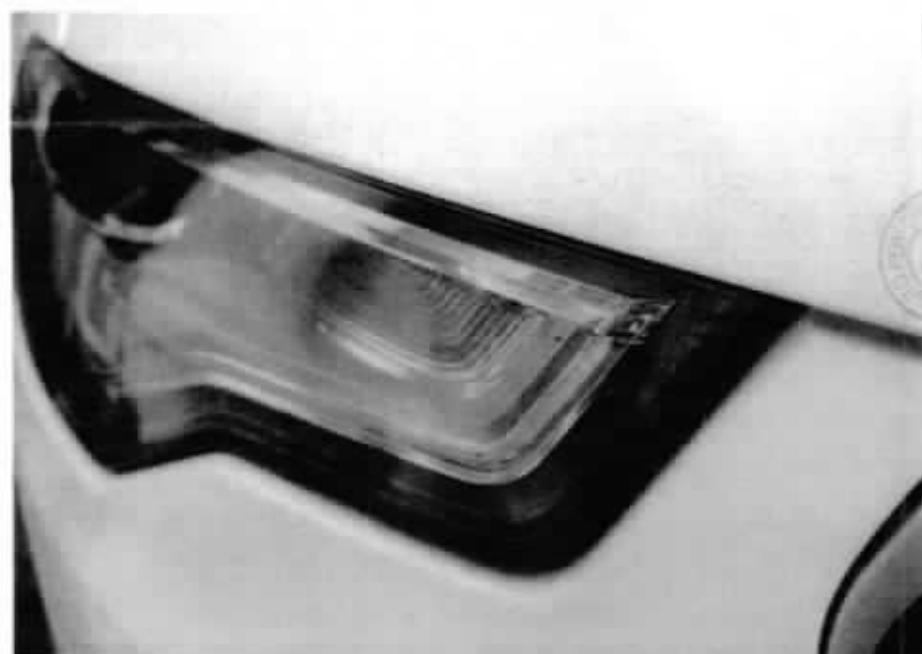
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

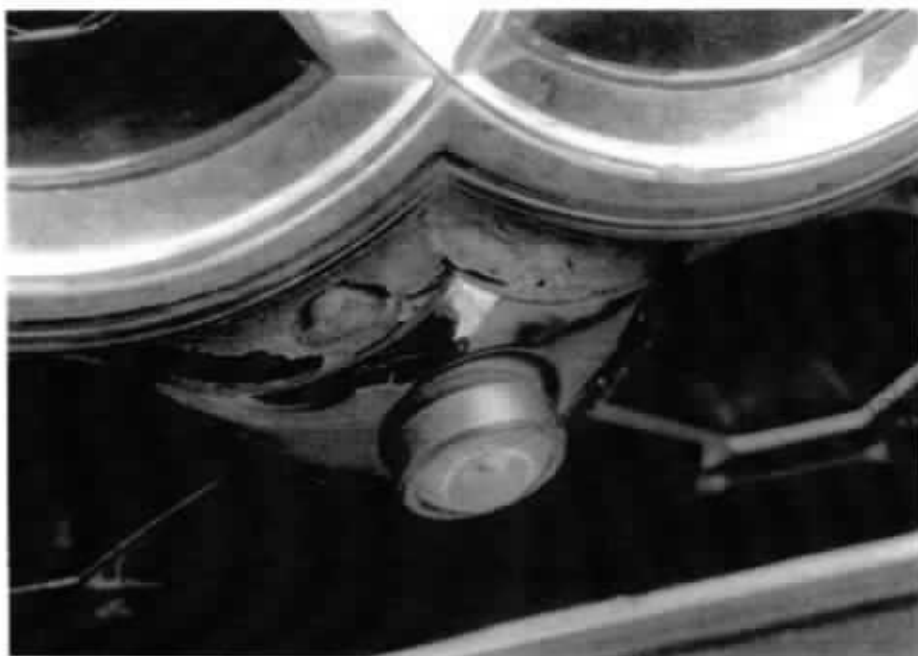






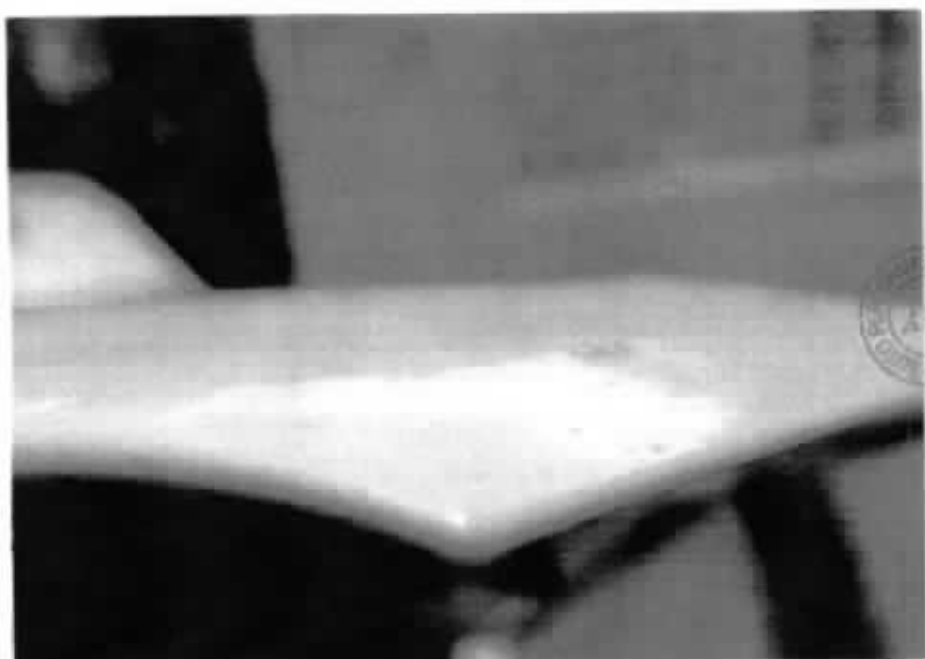






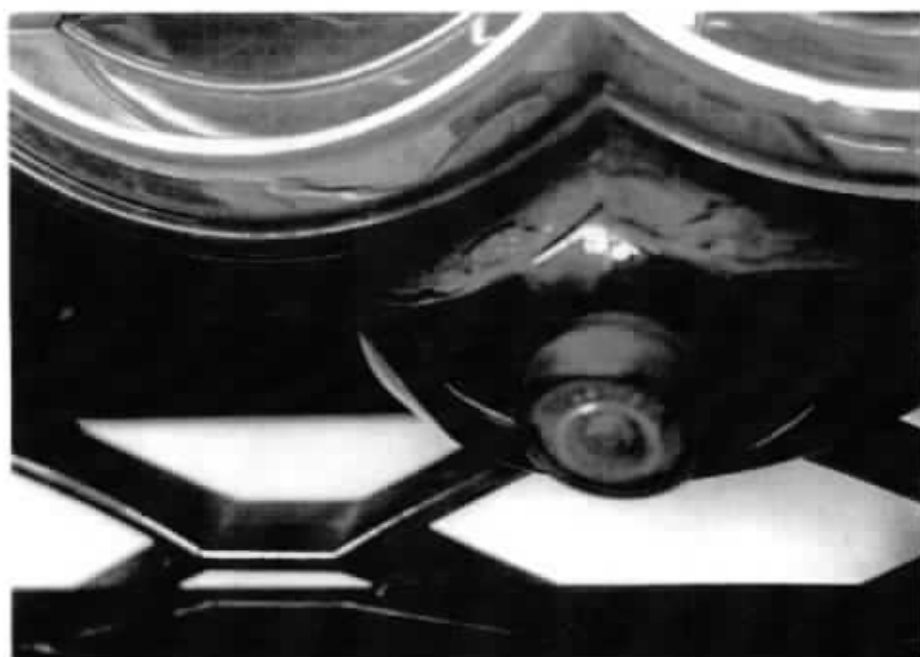
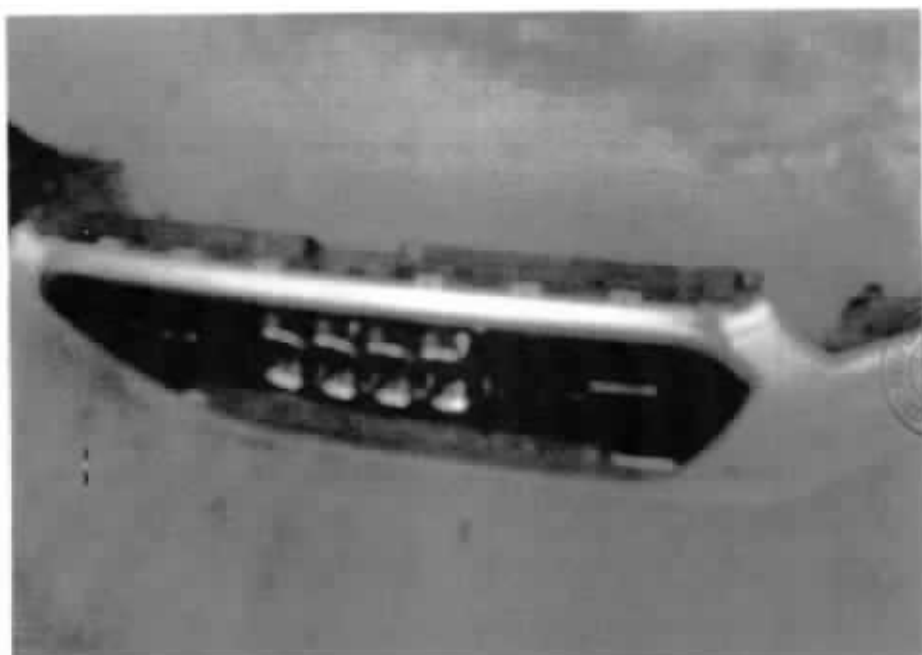


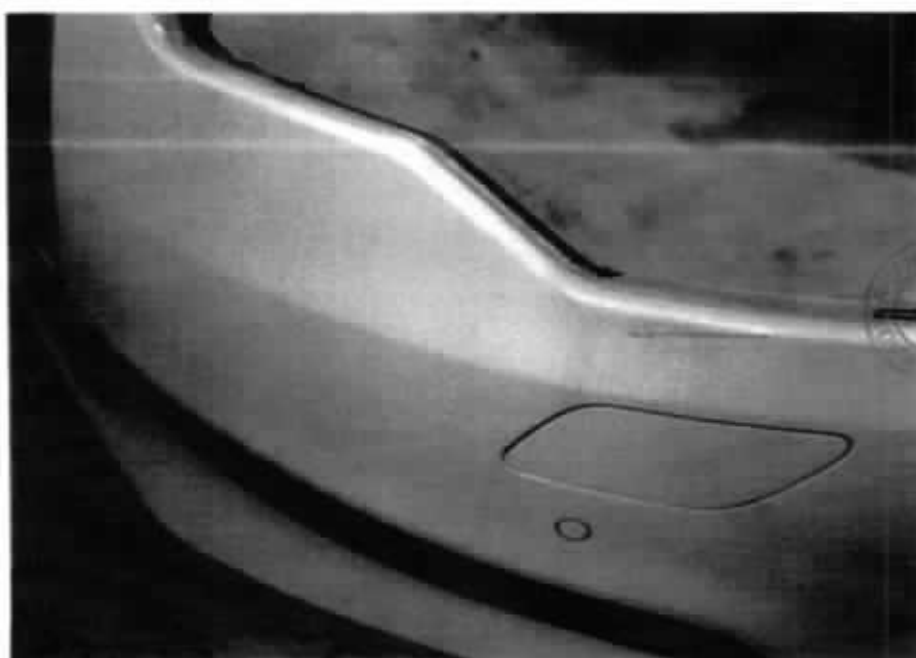
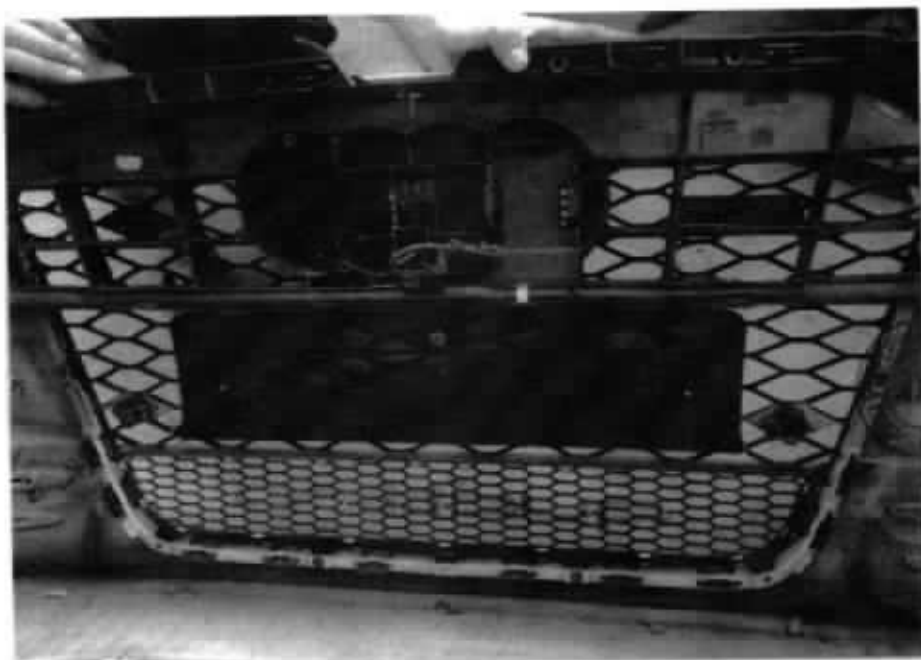




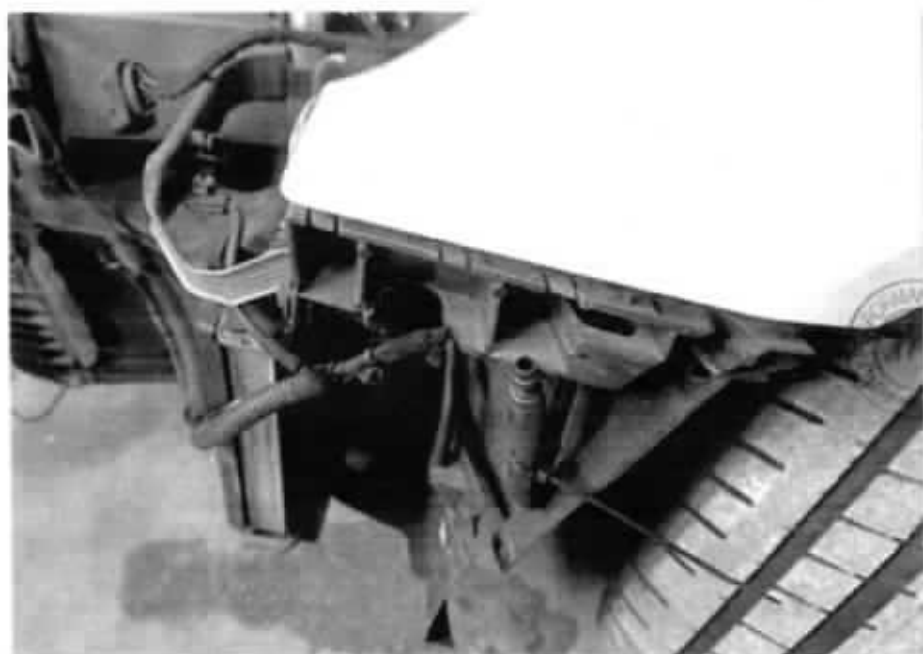
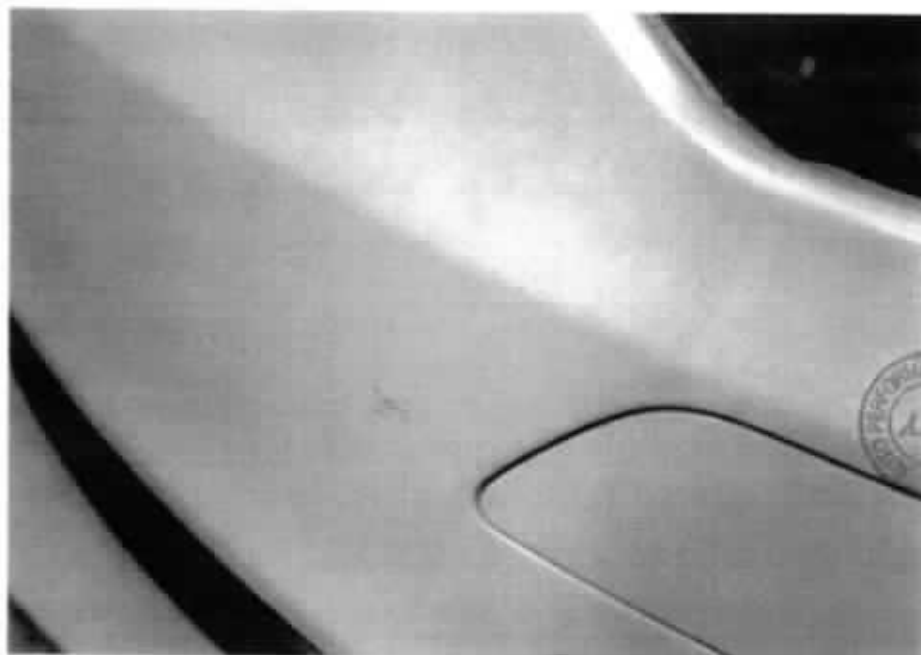












## Asher Sng (LKKAUTO)

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**From:** Asher Sng (LKKAUTO)  
**Sent:** Friday, 23 March 2018 11:32 AM  
**To:** JANET@SONGLILAI.COM.SG; SALES@SONGLILAI.COM.SG  
**Subject:** ACCIDENT INVOLVING GZ 5374T AND SLL 9500J ALONG MACPHERSON ROAD ON 12/02/2018



Auto  
Consultants  
Pte Ltd

---

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

23 MAR 2018

### SONGLILAI TRADING ENTERPRISE PTE LTD

Dear Sir/ Mdm

**OUR REF : CC4/ASM18003233/eb3**

**YOUR REF : GZ 5374T**

**ACCIDENT INVOLVING GZ 5374T AND SLL 9500J ALONG MACPHERSON ROAD ON 12/02/2018**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SLL 9500J against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had reversed and hit Third Party parked vehicle SLL 9500J. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com) within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)

- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6256 3561 or email us at [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com).

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Asher  
*Case Handler*  
 DID: 6841 6051  
 FAX: 6741 4108  
 Email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com)

c.c. AXA Insurance Pte Ltd (AXA)  
 (Motor Claims Dept)

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile

AXA INSURANCE PTE LTD

Ref : CC4/ASM18003233/M1eb3q2

8 SHENTON WAY #24-01  
AXA TOWERSINGAPORE 068811

Date : 15-11-2018



ATTN: STACEY NG

Code : ASM

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	GZ 5374T	Veh. Inspected	SLL 9500J
Policy No.	VCA/P1784392	Coverage (\$)	0.00
Claim No.	S8M0094Z	Excess (\$)	0.00
Assign From		Assign Date	20/02/2018

**2. Vehicle Particulars & Condition**

Make & Model	AUDI A6	c.c	29956
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	WAUZZZ4G2CN077000	Colour	WHITE
Odometer	102387	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	255/35 R17	GOODYEAR	8 mm
L/H Front Tyre	255/35 R17	GOODYEAR	8 mm
R/H Rear Tyre	255/35 R17	GOODYEAR	8 mm
L/H Rear Tyre	255/35 R17	GOODYEAR	8 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.
---

**5. General Information**

Accident Date	12/02/2018	Inspection Date	26/03/2018
Survey held at	COMFORTDELGRO - 205 BRADDELL ROAD		
Repairer	SZE KANG AUTOMOBILE SPRAYING SERVICES		

**5a. Remarks**

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 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. SLL 9500J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>REPLACEMENT OF PARTS</b>			
1	FRONT NUMBER PLATE WITH CASING (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT NUMBER PLATE GARNISH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	RADIATOR GRILLE (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	AUDI LOGO (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	RADIATOR GRILLE EMBLEM -RS6 (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	RADIATOR GRILLE EMBLEM -QUATTRO (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	RADIATOR LOWER GRILLE (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	LOWER RADIATOR GRILLE EMBLEM -QUATTRO (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	BONNET (NPA) (CONSISTENT)	TO REPAIR SEE LABOUR	-	-
1	BONNET SEAL (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	BONNET CATCH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	BONNET LOCK (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	HEADLAMP LH (NPA) (CONSISTENT)	CRACKED	-	-
1	HEADLAMP PANEL LH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT SUPPORT PANEL (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT SUPPORT PANEL TOP COVER (NPA) (CONSISTENT)	NOT NECESSARY	-	-
6	FRONT SUPPORT PANEL TOP COVER CLIP (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER (NPA) (CONSISTENT)	NOT NECESSARY	-	-
10	FRONT BUMPER CLIP (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER REINFORCEMENT (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER SIDE RETAINER LH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER SIDE RETAINER RH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER CHROME MOULDING LH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT BUMPER CHROME MOULDING RH (NPA) (CONSISTENT)	NOT NECESSARY	-	-

Report Ref No. CC4/ASM18003233/M1eb3q2

**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. 2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	PARKING SENSOR FRT LH (NPA) (CONSISTENT)	NOT NECESSARY	-	-
1	FRONT LH FOG LAMP COVER (NPA) (CONSISTENT)	NOT NECESSARY	-	-
			-	-
	<b>LABOUR</b>			
	TO PANEL BEAT ON RH FRONT PANEL, BONNET, REPLACE DAMAGED PARTS AND RE-ALIGN AFFECTED AREAS. INCLUSIVE OF THE REPAIR OF BONNET.		800.00	400.00
	TO PUTTY, APPLY PRIMER AND SPRAY PAINT FRONT BUMPER, BONNET, FRONT PANEL AND AFFECTED AREAS.		600.00	400.00
	TO APPLY RUST PROOFING ON REPLACED AND REPAIRED PANELS.	NOT NECESSARY	100.00	-
	TO INSTALL HEADLAMP AND FOCUS ON HEADLAMP ALIGNMENT.		120.00	30.00
	TO INSTALL FRONT PARKING SENSORS.	NOT NECESSARY	120.00	-
	TO DIAGNOSE AND RESET ELECTRONIC SYSTEM.	NOT NECESSARY	150.00	-
			1,890.00	830.00
<b>GRAND TOTAL</b>			<b>1,890.00</b>	<b>830.00</b>
<b>RECOMMENDED COST OF REPAIRS</b>				<b>830.00</b>

Report Ref No. CC4/ASM18003233/M1eb3q2

**MA CHIN FOOK**

Automotive Assessor

**HO LEONG CHUAN**

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report in whole or in part, does so at his or her own risk.

<< Service Request Details

Claim	SJM0094Z
Reference	CC4/ASM18003233/M14b3p2 
Loss Date	12 February 2018
Request Date	23 August 2018
Due Date	
Vendor Name	LOK AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions


Next Step










Wait for: Approve Invoice

Add Invoice

Vehicle Information	
Incident Vehicle Registration #	SLL9500J
Make	TPVD AUDI
Model	AUDI A6 3.0T
Service Address	
...	
Primary Contact/Insured	
SONGLAI TRADING ENTERPRISE PTE LTD 171 KAMPONG AMPAT, #01-04 K.A. FOODLINK, 368330, Singapore	
Claim Handler	
CHEN Xinyou	
chen.xinyou@axa.com.sg	

Additional Instructions

Messages	Invoices	History	Documents	Assessment	Metrics	Notes
Document Type						
<div>Document SubType</div>						
<div>+ Upload Document</div>						
NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED		
<div> Accident Statement</div>	Reports & Statement		Merrison			

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LKX Invoice 1.pdf	Invoice	Surveyor / Assessor expense	LKX AUTO CONSULTANTS PTE LTD (TP)	15 November 2018
 LKX Inspection.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	15 November 2018
 LKX Adjustment 1a.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	15 November 2018
 LKX PHOTO.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	15 November 2018
 TP ESTIMATE- MARKED (INCOMPLETE).pdf	Reports & Statement	Estimate / Quotation	LKX AUTO CONSULTANTS PTE LTD (TP)	29 March 2018
 P1784392_IN_00002_1.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	NG Stacy	1 March 2018
 P1784392_CI_00002_1.pdf	Forms / Claim Documents	Policy Schedule / Covernote / Certificate of Insurance	NG Stacy	1 March 2018
 EMAIL.mng	Letters and Correspondence	Workshop	KADRI Maateen	19 February 2018
 GIA REPORT OF SLL95001 (TP).PDF	Reports & Statement	GIA Report	KADRI Maateen	19 February 2018