

15/5/2010

USE OWNER:

CC

4, AXA18003265, UKA591

LKK:

IDAC:

Sole owner:

DOI:

ASSIGNMENT

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

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

Insured Liability: %

Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

PRELIMINARY ADVICE

Date/Time:

Sent By:

Post-Repair Photos:

Others:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time: 02/5/18

Confirm with: Jason.

Email

Call

Final Liability:

%

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

If NO or B 28, Ass. Lia:

Repair Cost:

SS 4815.00

Loss of Rental (LOR):

SS 600.00

(

5 days) X100

Loss of Use (LOU):

SS

(

5 x days)

Loss of Income (LOI):

SS

(

5 x days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

SS

Medical:

SS

Disbursement:

SS

(e.g. Tow/ Independent)

Legal Cost

SS

Total:

SS 5315.00

Global Sum SS:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS 5315.00

Name 1:

Kim Chwee Auto Pte Ltd

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:

RECEIVED 10 APR 2018

RECEIVED 07 MAY 2018

COPY SENT

1c ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SKW 5812Pat Workshop m/s Kumchar

of _____

Insured: _____

Policy No. _____

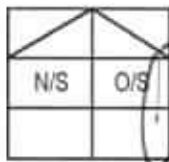
Claims No. _____

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: 14800

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKW 5812P Yr Regn: 26/6/08Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /Truck / Trailer or CAMake: Honda Civic c.c. 1595Colour: Klecko A/C: Insured / Std / NI / NASp. Reading: 178555 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHMFD 462085201766Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: 215/45R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 17/2/18

Survey held at

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

O/S Rear

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

Date / Time Action / Instruction

4th5/3/18 conturb 45 4712conturb 45 4712conturb 45 4712conturb 45 4712conturb 45 4712conturb 45 4712

Date/Time, File Pass to?

1) ☐ : Prel. Report

Date/Time, File Return to?

2) ☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$☐ : Interview (\$☐ : Tech. Invs (\$☐ : Weekend (\$

Survey Fee:

Transportation:

____ \$ + RS. ____ \$

Photos

Others

TOTAL

Report Format : _____

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

Zaini (LKK Auto)

From: Zaini (LKK Auto)
Sent: Friday, 23 February 2018 3:31 PM
To: claims@transcab.com.sg
Cc: 'carrisalee@ava-ins.com'; 'icewong@ava-ins.com'; 'ireneng@ava-ins.com'; 'foonghon@ava-ins.com'; Hsiao Tong (LKKAuto)
Subject: YOUR REF : P1680520 (SHF 541D)_ACCIDENT INVOLVING SHF 541D & SKW 5812P ALONG JALAN SELAMAT ON 17/02/2018

23 February 2018

Transcab Taxi
Singapore

Dear Sir/Madam,

OUR REF : CC6/CTI18001701/Uks3
YOUR REF : P1680520 (SHF 541D)
ACCIDENT INVOLVING SHF 541D & SKW 5812P ALONG JALAN SELAMAT ON 17/02/2018

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 KIM CHWEE AUTO PTE LTD acting on behalf of the owner of SKW 5812P against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided to the Third Party stationary vehicle SKW 5812P. As such, liability is down against us.

We also wish to advise that there is an excess of **S\$5,000.00** attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

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 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following **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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg / Zaini@lkkauto.com or deliver it by hand to our Customer Care Centre.

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 authorized driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we 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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or cst@axa.com.sg / Zaini@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Zaini Kusaini | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2132 | email: Zaini@lkkauto.com | fax: 6741-4108

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

View Received Message

This mail is associated with :

***SKW5812P (C0470830)**
[SHF541D]

TP

JA MOTORLINE LLEASING
Feb 17 2018 12:00AM
[TRANS-CAB SERVICES PTE LTD]
Kim Chwee Auto Pte Ltd

[Reply](#) [Reply All](#) [Mark as Unread](#) [Print Message](#) [Delete Message](#) [Forward](#)

From AXA Insurance Pte Ltd (HQ) (AXA_SG), sent on 24/04/2018 11:35 AM.

To LKK_HQ

Subject Alert - Adj Mandate Approved (S\$5315.00) - SKW5812P - Claim Handler: Cynthia Loh

Approved:5315.00.

DOCUMENTS SUMMARY

There are no documents.

KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

Date : 23.03.2018

AXA Insurance Singapore Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claim Department

ACCIDENT INVOLVING VEHICLE: SKW5812P AND SHF541D ON 17.02.2018

We are the authorized repair workshop for the owner of motor vehicle no: **SKW5812P**, which was involved in the captioned accident with your insured vehicle no: **SHF541D**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1) Cost of Repair (inclusive of GST)	\$	4,815.00
2) Loss Of Use Rental	\$	500.00
	<u>\$</u>	<u>5,315.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|------------------------------------|----------------------------------|
| a) Final Repair Invoice | b) Vehicle Registration Log Card |
| c) Rental Agreement/Invoice | d) I/C & Driving Licence |
| e) Insurance Certificate | f) GIA Search Result/GIA Report |
| g) Letter of Authorisation, etc... | |

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fastechauto.com.sg)

For Kim Chwee Auto Pte Ltd

Zaini (LKK Auto)

From: Zaini (LKK Auto)
Sent: Friday, 23 February 2018 3:31 PM
To: claims@transcab.com.sg
Cc: 'carrisalee@ava-ins.com'; 'icewong@ava-ins.com'; 'ireneng@ava-ins.com'; 'foonghon@ava-ins.com'; Hsiao Tong (LKKAuto)
Subject: YOUR REF : P1680520 (SHF 541D)_ACCIDENT INVOLVING SHF 541D & SKW 5812P ALONG JALAN SELAMAT ON 17/02/2018

23 February 2018

Transcab Taxi
Singapore

Dear Sir/Madam,

OUR REF : CC6/CTI18001701/Uks3
YOUR REF : P1680520 (SHF 541D)
ACCIDENT INVOLVING SHF 541D & SKW 5812P ALONG JALAN SELAMAT ON 17/02/2018

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 KIM CHWEE AUTO PTE LTD acting on behalf of the owner of SKW 5812P against your motor insurance policy.

Based on the accident report, accident scenario, it was reported that your vehicle had collided to the Third Party stationary vehicle SKW 5812P. As such, liability is down against us.

We also wish to advise that there is an excess of **S\$5,000.00** attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim.

AXA shall keep you informed of the third party claim settlement and thereafter kindly let AXA have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by AXA for the above subject matter, AXA expressly reserves all their rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

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 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following **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 our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg / Zaini@lkkauto.com or deliver it by hand to our Customer Care Centre.

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 authorized driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we 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 our Claims Service Team at 1800-880 4888 at our operating hours 9:00am to 5:30pm (press 1 for GI and option 3 for claims) or cst@axa.com.sg / Zaini@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Thank you.

Best Regards,

Zaini Kusaini | Case Handler

LKK Auto Consultants Pte Ltd

DID: 6841-2132 | email: Zaini@lkkauto.com | fax: 6741-4108

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

AUTHORISATION TO ACT

I/We, Ta Motorline Leasing (the third party claimant) of 212 Telok Kuan
Road #04-214 Bright Centre 542283 (address), owner of SKW5812P (vehicle no.) hereby
authorize Kim Chuan Auto Pte Ltd ("the workshop") to act for me with respect
to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no.
SKW5812P that was damaged pursuant to the accident which occurred on 17/2/18 (date)
along JLN Selamat 31 (location) involving
vehicle no/s SHF541D ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they
deem fit and the workshop is further authorized to receive payment further to settlement of my
claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a
without prejudice and without admission of liability basis insofar as the driver/owner/insurers
of the other vehicle/s is concerned.

Dated this 02 (day) of May (month) 2018 (year)




Signed by "the third party claimant"
(with company stamp if applicable)




Signed by "the workshop"
(with company stamp)



redefining / insurance

*** This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an Evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

CLAIM REF : C0470830
INSURED : TRANS-CAB SERVICES PTE LTD

DISCHARGE VOUCHER

We/I **JA MOTORLINE LLEASING** hereby agree to accept the sum of dollars Five Thousand Three Hundred Fifteen Only (**S\$ 5,315.00**) paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. SHF 541D as a result of an accident along JLN SELAMAT 31 on 17/02/2018 of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. SKW 5812P.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. SHF 541D in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. SHF 541D

Dated this 02 day of May 2018

Claimant's Signature

: 

NRIC no./ Company Stamp

: 53352350L

Occupation/ Business

: BIK 349 Woodlands Ave 3

Address

: #12-61 ST30349

Telephone No.

: 96635308

Witness's Name

: TANG JUN ZHONG

Witness's Signature

: 

Witness's NRIC No.

: S8704986H

TAX INVOICE

KIM CHWEE AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-50 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 199802379R

AXA Insurance Singapore Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claim Department

Tax Invoice : 20151

Date: 23.03.2018

Vehicle No: SKW5812P

Make/Model: HONDA CIVIC 1.6

Chassis/Eng# :

Accident Date: 17.02.2018

Claim No : 0218-20151

:

	Amount
To proceed on lump sum repair	SS 4,500.00

E. & O. E.

Total : S\$ 4,500.00

GST @ 7% : S\$ 315.00

Amount Due : **S\$ 4,815.00**


for KIM CHWEE AUTO PTE LTD

All Invoices are subjected to GST

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: JA MOTORLINE LEASING

Invoice : DCR-2018-02-16

Date : 24.02.2018

Agreement No : 19934

Payment Term: LOD

DESCRIPTION

AMOUNT

Rental charges for vehicle : SJD847J (0218-20151) \$ 500.00

Rental Period from 19.02.2018 to 24.02.2018 .

E. & O. E.

Total \$ 500.00

NANCY LAM

for Dynamic Car Rental

Dynamic Car Rental

DCR-2018-02-16

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 19934

Name <i>Ja Motorline Leasing</i>			REG. No. <i>SJD8473</i>	MAKE MODEL:						
ADDRESS				DIESEL	PETROL	E	1/4	1/2	3/4	F
			KM IN	DATE & TIME IN <i>24/2/18 @ 2.04pm</i>						
			KM OUT	DATE & TIME OUT <i>19/2/18 @ 12.29pm</i>						
			KM DRIVEN	TIME USED						
NAMED DRIVER <i>Osmun Bin Babjee</i>										
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	HOURS		@\$					
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	<i>5</i> DAYS		@\$	<i>100</i>	<i>500</i>			
ADD NAMED DRIVER			WEEKS		@\$					
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MONTHS		@\$					
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE								
IMPORTANT NOTES: This vehicle is licenced to carry 04 passengers only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay first \$2000 under section I & II in any accident plus loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses. Vehicle return during office hour only. No Service on Public Holiday and Sunday. ADDITIONAL CONDITIONS: * Geographical areas: Singapore & West Malaysia. * Driver must be: a) 18 years old and above; b) holding a valid relevant class of driving license. * Additional Own Damage Excess of \$51,000 is applicable for any named/unnamed drivers who: a) age 22 to 23 years old; b) age 66 to 70 years old; c) with driving experience of 1 year to less than 2 years in Singapore on the relevant classes of driving license. * Additional All Claims excess of \$52,000 is applicable for any named/unnamed drivers who: a) is 18 years old to 21 years old and/or b) is 71 years old and above and/or c) with driving experience of less than 1 year on the relevant classes of driving license. * Upon returning the replacement vehicle, you must ensure that all expensive and important items to be removed away from this replacement vehicle. We'll not be responsible for any reporting of such losses. * Hirer is liable to pay first \$2000 under section I & II in any accident plus loss of earning while damage vehicle is under repair. Hirer is responsible for Additional \$2,000.00 Excess to the THIRD PARTY DAMAGE / INJURY claims.			BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)		SUB-TOTAL		<i>500</i>			
					TOTAL RENTAL					
					DELIVERY FEE					
					COLLECTION FEE					
			X PER DAY \$ PER WEEK \$ PER MONTH \$							
			BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)							
			X PER DAY \$ PER WEEK \$ PER MONTH \$							
			PREPAYMENT		TOTAL CHARGE					
			CHECK		DEPOSIT					
			CASH							
			RECEIPT NO.		NETT CHARGE					
			AMOUNT DUE / REFUND							

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE

DAY OF

X

DYNAMIC CAR RENTAL

X

RENTER'S/DRIVER'S SIGNATURE



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

Direct Settlement

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	19 Feb 2018		21 Feb 2018 10:43 Edit Adj Rpt	\$4,500.00 Edit Estimates	\$4,500.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	TRANS-CAB SERVICES PTE LTD. Co. Reg. No.: 200303878K								
Main Claimant:	JA MOTORLINE LEASING. Co. Reg. No.: 53352350L								
Vehicle Reg. No.:	SKW5812P	Date of Loss:	17/02/2018 00:00 - :59 [115 Months and 22 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / C0470830	Policy/Cover Note No.:	P1680520 (Third Party Only)						
Vehicle Reg. No. (Insured):	SHF541D	Policy No. (Claimant):	5097475267						
		Excess:	S\$5,000.00						
Repairer:	Kim Chwee Auto Pte Ltd (HQ) 1 Kaki Bukit Avenue 6 #01-48, AutoBay@Kaki Bukit, 417883 Eunos - Tel: 67465405/67417244								
Handling Insurer:	AXA Insurance Pte Ltd (HQ) - Tel: 6338 7288 ... [Handled by Cynthia Loh - 68804843]								
Claimant's Insurer:	NTUC Income Insurance Co-operative Ltd (HQ) - Tel:								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 02/03/2018]								
Adj Asp. Remarks:	1. Please assign Marcus Chua. 2. TP is ARC workshop.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
<ul style="list-style-type: none"> AXA_SG (24/04/2018): Alert - Adj Mandate Approved (S\$5315.00) - SKW5812P - Claim Handler: Cynthia Loh AXA_SG (21/02/2018): New TP Assignment - C0470830/P1680520 									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SKW5812P (C0470830)
[SHF541D]
TP
JA MOTORLINE LEASING
Feb 17 2018 12:00AM
[TRANS-CAB SERVICES PTE LTD]
Kim Chwee Auto Pte Ltd

Upload Documents		Upload Photos		Compose New Letter		View View in Browser	
Letters/Correspondences							1 per page <input type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)				Thumbnail	Print
1	(Draft)	Third Party Express Settlement - Payment Breakdown					Edit
Assessment Reports							1 per page <input type="checkbox"/>
No	Finalized On	AXA Insurance Pte Ltd (HQ)				Thumbnail	Print
1	21/02/18 10:38	Accident Statement <small>From: SC - Reg. No: SHF541D, Claimant: TRANS-CAB SERVICES PTE LTD</small>					Load HTM
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)				Thumbnail	Print
1	10/04/18 10:30	Adjuster Immediate Advice					Load HTM
Documentation							1 per page <input type="checkbox"/>
No	Finalized On	AXA Insurance Pte Ltd (HQ)				Thumbnail	Print
1	19/02/18 13:27	EMAIL					Load PDF
2	19/02/18 14:50	EMAIL					Load PDF
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)				Thumbnail	Print
1	22/02/18 10:35	TP GIA REPORT					Load PDF
2	10/04/18 10:24	LKK Survey Photos					Load PDF
3	10/04/18 10:24	LKK Resurvey Photos (1)					Load PDF
4	10/04/18 10:24	LKK Resurvey Photos (2)					Load PDF
5	10/04/18 10:24	TP ESTIMATE - MARKED.					Load PDF
6	11/04/18 16:41	LETTER TO OI					Load PDF
7	11/04/18 16:41	RENTAL RECEIPT					Load PDF
8	08/05/18 08:23	WORKSHOP INVOICE					Load PDF
9	08/05/18 08:23	AUTHORISATION TO ACT FORM					Load PDF
10	08/05/18 08:23	DISCHARGE VOUCHER					Load PDF
11	08/05/18 08:23	LOD					Load PDF

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SHF541D (Insd veh)	Model:	HONDA CIVIC 1.6 L VTi (A)
	SKW5812P (TP veh)		
Date of Accident:	17/02/2018		

Global Sum Settlement	:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Repair Estimate	:	\$	13,877.69	
Final Repair Cost	:	\$	4,815.00	
Loss of Use	:	\$		days at \$0.00 per day
Rental (if any)	:	\$	500.00	5 days
LTA / GIA Search Fee	:	\$	0.00	
Others:	:	\$	0.00	
	:	\$		
Final Settlement Sum	:	\$	5,315.00	
Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below)				
A) For <u>Non GIA Registered Workshop</u> : Agreed Liability ____ 100 ____ (%)				
B) For <u>GIA Registered Workshop</u> : BOLA Applicable: Yes/ No BOLA Scenario No: ____				
BOLA Liability: ____ (%) Assessed Liability (*): ____ (%)				
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.				
Remarks _____				

Payment Instruction: Payee's Breakdown			
1)	Kim Chwee Auto Pte Ltd	:	5,315.00
2)		:	

JOANNE LEE KHANG MIN

LKK Auto Consultants Pte Ltd

08 May
2018

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

LKK Auto Consultants Pte Ltd (Co.Reg No:199607198R)

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC4/AXA18003265/UWA3Q2

Date: 08/05/2018

REFERENCE

Handling Insurer:	AXA Insurance Pte Ltd	Policy No:	P1680520
Claimant Vehicle No :	SKW5812P	Insured Vehicle No :	SHF541D
Date of Loss:	17/02/2018	Nature of Claim:	TP
		Claim No:	C0470830

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SKW5812P	Engine No:	R16A13005461
Make & Model:	HONDA CIVIC, 1.6 L VTI (A)	Chassis No:	JHMFD46208S201766
Reg. Date:	26/06/2008 (Man. Year: 2008)	Odometer:	176555 km
Colour:	Black		
Engine Capacity:	1595 cc		
Market Value/New Car Price:	N/A		
Sum Insured (S\$):	Market Value/New Car Price		

CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

CONDITION OF TYRES

Front Tyre Size:	215/45 R17	Rear Tyre Size:	215/45 R17
Front Left Side:	Continental 6 mm	Rear Left Side:	Continental 6 mm
Front Right Side:	Continental 6 mm	Rear Right Side:	Continental 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	9,089.80	3,549.84	5,539.96	60.95
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,880.00	2,130.00	1,750.00	45.10
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	12,969.80	5,679.84	7,289.96	56.21
Approved Total (Overridden) (S\$)		4,500.00		
(S\$)	12,969.80	4,500.00	8,469.80	65.30
+ GST 7.00/7.00% (S\$)	907.89	315.00	592.89	65.30
Nett Amount (S\$)	13,877.69	4,815.00	9,062.69	65.30
+ Car Rental (5.0 x S\$100.00/day) (S\$)		500.00		
Nett Liability (S\$)		5,315.00		

INSPECTION

Date of Assignment: 21/02/2018
Date Inspected: 20/02/2018 Inspected At:

Kim Chwee Auto Pte Ltd (HQ)
1 Kaki Bukit Avenue 6 #01-48,
AutoBay@Kaki Bukit
Singapore 417883

Estimated Period of Repair: 5.0 days

Adjuster: MARCUS CHUA

Manager: VIVIAN LAU PEI FENG

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

REPAIR DETAILS

Reference

Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 11 Apr 2018)
Parts: 143	HONDA CIVIC 1.6 L VTI (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SKW5812P)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR DOOR O/S (CONSISTENT)	Not Necessary	912.10 F	*- FL
2	1		*REAR FENDER O/S (CONSISTENT)	Badly Dented	985.10 F	*765.30 FL
3	1		*REAR FENDER INNER TRIM O/S (CONSISTENT)	Not Necessary	242.30 F	*- FL
4	1		*REAR WINDSCREEN MOULDING (CONSISTENT)	Necessary	86.20 F	*86.20 FL
5	1		*REAR BUMPER (CONSISTENT)	Distorted	745.00 F	*638.00 FL
6	1		*REAR BUMPER SIDE HOLDER O/S (CONSISTENT)	Bent	22.50 F	*22.50 FL
7	1		*SET REAR BUMPER CLIPS (CONSISTENT)	Necessary	40.00 F	*40.00 FL
8	1		*TAILLAMP O/S (CONSISTENT)	Scratched	382.10 F	*280.40 FL
9	1		*REAR SHOCK ABSORBER O/S (CONSISTENT)	Bent / Twisted	322.90 F	*225.30 FL
10	1		*REAR TRAILING ARM O/S (CONSISTENT)	Bent	688.20 F	*688.20 FL
11	1		*REAR WHEEL HUB BEARING O/S (CONSISTENT)	Damaged	520.10 F	*345.30 FL
12	1		*REAR KNUCKLE ARM O/S (CONSISTENT)	Bent	665.30 F	*388.60 FL
13	1		*REAR TRUST ARM O/S (CONSISTENT)	Bent	145.20 F	*145.20 FL
14	1		*REAR CROSS MEMBER (CONSISTENT)	Not Necessary	1,025.00 F	*- FL
15	1		*REAR PANEL GARNISH (CONSISTENT)	Repair	820.00 F	*- FL
16	1		*REAR FENDER UNDER COVER O/S (CONSISTENT)	Torn	211.20 F	*162.30 FL
17	1		*REAR END PANEL (CONSISTENT)	Repair	296.60 F	*- FL
18	1		*REAR WINDSCREEN SEALANT (CONSISTENT)	Necessary	50.00 FS	*40.00 FS
19	1		*REAR SPORT RIM O/S (CONSISTENT)	Dented / Bent	680.00 FS	*480.00 FS
20	1		*REAR TYRE O/S (CONSISTENT)	Serviceable	250.00 FS	*- FS

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

Sub Total (\$\$)	9,089.80	4,307.30
- List Item Discount on L Items 0.00/20.00% (\$\$)	0.00	757.46
Total Parts (\$\$)	9,089.80	3,549.84

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	TO CHECK WIRING	New	80.00	20.00
2	TO DISMANTLE & REFIX REVERSE SENSOR	New	80.00	50.00
3	TO DISMANTLE & REFIX REAR WINDSCREEN	New	150.00	120.00
4	TO DISMANTLE & REPLACING REAR UNDERCARRIAGE	New	380.00	120.00
5	TO CONDUCT WHEEL ALIGNMENT	New	120.00	60.00
6	TO DISMANTLE & REFIX SEAT ,CUSHION UPHOLSTERY	New	150.00	80.00
7	TO SPRAY RUST PROOFING	New	120.00	30.00
8	TOWING CHARGE	New	100.00	50.00
9	LABOUR FOR PANEL BEATING ,CUT,WELD ,STRAIGHTEN & REPLACING PARTS	New	1,200.00	800.00
10	TO PUTTY & SPRAY PAINTING	New	1,500.00	800.00
Gross Labour Cost (S\$)			3,880.00	2,130.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >