

ASS. REC. BY:

REF: CS/ICS18003600/K4d307 Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Lionel Chuaof ECICSDate/Time: 14/2/18 @ 4:28pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHB 9831D

Insured:

SLC 2554Y

at Workshop m/s

Trans-Cab

Tel:

6287 6666

of

NO. 2 AMK Stt 63

Policy No:

Claim No:

DMP41800026H/LC

Sum Insured:

Excess:

Make of Veh:

D.O.A.

12/2/18

(Client's Record)

CA / REV / REP. / REV 24 HRS

wp?

H.O.D. Endorsement:

Date/Time: 14/2/18 @ 4:51pm

Person Contacted:

Jiong howVehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction
	(✓) Estimate
	SHB 9831D - CC4 / FWD 18000466 / Kea3
	SLC 2554Y - X

D.O.A. 5/1/18

ASS. REC. BY:

REF: 1051

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

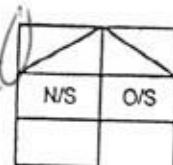
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: S14B 98310 Yr Regn: 08, 13

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

Truck / Trailer or

Make: Renault Latitude c.c. 1995

Colour: M-White 1st A/C: Insured / Std / NI / NA

Sp. Reading: 523383 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VIFI ABL 15A C 273328

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60R16

R: _____

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

TOYO / YOKO or

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 12/2/18

Survey held at

Rear

R/Bal. 6 mm

L/Bal. 6 mm

D.O.I. 19/2/18

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

N/S 1st

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

20/2 File pass to Graham Viki
 11 Pm 8 33502 (Red: 3621479.9110)

RECEIVED 13 MAR 2018

Date/Time, File Pass to?

1) 13/3 Typst
 Date/Time, File Return to?

☐ : Prell. Report
☒ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: _____

Survey Fee: 150

Transportation: _____

S - RS. \$

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech Invs (\$)☐ : Weekend (\$)

Report Format: TP

Lump Sum / I.B.I.: (\$ 33501)

150
1150

ADDITIONAL

Date: 19/2/18

Estimated Cost:

OD / TP / NS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: SHB 9831D

BY Workstation: Trans. Cab

OF:

Insured:

Policy No:

Claims No:

Sum Insured:

Excess:

Diagnosis Record:

Make of Van:

(Policy Condition)

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

NS	OS

Ball or Market Value:

OAC Accident Report: Consistent? : Yes or No

OAC PR Seen: Consistent? : Yes or No

Est Repairs: days Res: Yes or No

LTM Sum: % O Val: Yes or No

CA / REV / REP. / 24 HRS 'up

Vehicle IN / OUT

Date: Person Contacted:

Date:

V Reg:

Type: M Car / M2 Car / Bus / Van / Lorry / Taxi / Prime Mover

Truck / Trailer:

Make:

Colour: R.C. Painted: S/S: N/A

St. Reading: TP Read: Painted: S/S: N/A

Engine:

C/N:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Incident / Jammed / Leaked / Burnt on

Brakes: Incident / Jammed / Leaked / Burnt on

Mod: Nil / S Rim / STD Air Rim

Tyre Size: R

BS / DUN / EXNOVA / GY / FS / LIZA / MID / OHTSU / PR / SLM
TOYO / YOKO

Front:

Rear:

R.Ba: mm R.Ba: mm

L.Ba: mm L.Ba: mm

C.O.A: C.O. 19/2/18

Surveyed at:

Detail Damages: FR / Rear / OS / NS / U/C / Roofed on

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

Date / Time Action / Instruction

12 File pass to Carham

Date/Time File Received: ☐ Preli. Report☐ Final Report

Date/Time File Returned:

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Taxes:

Other:

Total:

Add Fee:

S/S: No

S/S: No

S/S: No

S/S: No

Remarks:

LTM Sum: 100%

Catherine Chong (LKK Auto)

From: ECICS Claims <claims@ecics.com.sg>
Sent: Wednesday, 14 February, 2018 4:28 PM
To: jionghow.ng@transcab.com.sg; admin-d@lkkauto.com; assignments@lkkauto.com
Cc: ECICS Claims; candy.kong@transcab.com.sg; SUR
Subject: RE: ARRANGE SURVEY FOR SHB9831D
Attachments: img-214143947.pdf

Without Prejudice

Thank you for your email with the attachment.

Please note the above claim is still pending to establish the liability and let us have your evidence to show for our perusal and action.

We will also appoint LKK for the Survey.

Aside to LKK,

Please assist to arrange for TP Survey.

Thank you.

Regards,

Lionel Chua

DID: +65 6303 0167

FAX: +65 6338 9267

ECICS LIMITED

Email: claims@ecics.com.sg

follow us on  facebook follow us on  twitter visit our website ecics.com.sg 

From: jionghow.ng [mailto:jionghow.ng@transcab.com.sg]

Sent: Wednesday, 14 February, 2018 2:43 PM

To: ECICS Claims

Cc: 'Candy Kong'

Subject: ARRANGE SURVEY FOR SHB9831D

Hi all,

Please arrange survey for SHB9831D

Please assign this assignment to LKK Auto Consultant Pte Ltd

I have attached GIA and Estimate for your perusal

Thank you.

Regards,

Jiong How Ng

TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63, Singapore 569111
Main Line : (65) 6287 6666 Fax Line: (65) 6257 1330
Website: www.transcab.com.sg



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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile					
ECICS LTD			Ref : CS/ICS18003600/Ktd3		
7 TEMASEK BOULEVARD #10-01 SUNTEC TOWER ONE SINGAPORE 038987 			Date : 26-02-2018		
			Code : ICS		
1. Policy Particulars :- THIRD PARTY CLAIM					
Insured Veh.		SLC 2554Y		Veh. Inspected	SHB 9831D
Policy No.				Coverage (\$)	0.00
Claim No.				Excess (\$)	0.00
Assign From		LIONEL CHUA		Assign Date	26/02/2018
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		12/02/2018		Inspection Date	19/02/2018
Survey held at		TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks					
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.					

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 15:22
Date Of Accident	12/02/2018 00:25
Exact Location Of Accident	MIDDLE ROAD TOWARDS WATERLOO STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB9831D
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666

Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 DCI AUTO D/AB 4DR (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	

Driver

Name of Driver	NG TYE HUAT
NRIC No	S0915347J
Date Of Birth	26/09/1949
Occupation	OUTDOOR
Date Of Driving Pass	21/07/1969
Driving Experience	48 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98953855
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 131B KIM TIAN ROAD #25-175
Postcode	162131
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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)	2
Passenger 1	
	NAME: UNKNOWN
	GENDER: MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KIM SENG NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 5 BEO CRESCENT , POSTCODE: 169981 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2718999 - FAX NO: 63772527
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT : T/20180213/2069

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	SLC2554Y
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)

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 Pg. 1

SKETCH PLAN

A - SHB983TD
B - SLK2554Y

Middle Rd
towards
Waterloo Street

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Please refer to police report -

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180213/2069

Police Station Of Origin:
Kim Seng NPP
5 Beo Crescent SINGAPORE 169981
Tel No: 1800-2718999

1 of 3

Report No. T/20180213/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/02/2018 13:54		Vide Report No.:		Station Diary No.: 12	
Informant's Particulars					
Name of Informant: NG TYE HUAT			Address: APT BLK 131B KIM TIAN ROAD #25-175 SINGAPORE 162131		
ID Type / ID No.: NRIC NO / S0915347J			Contact No.: Home/Office: 62742038 Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 68	Date of Birth: 26/09/1949	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 12/02/2018 00:25	Type of Location: X-Junction
Location: MIDDLE ROAD WATERLOO STREET from middle road turning right to waterloo street, near to fortune centre				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SHB9831D	Car				Slightly Damaged	1
SLC2554Y	Car				Slightly Damaged	3

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180213/2069

Police Station Of Origin:
Kim Seng NPP
5 Bco Crescent SINGAPORE 169981
Tel No: 1800-2718999

2 of 3

Report No. T/20180213/2069

CONTINUATION OF REPORT

Driver			
Name	NG TYE HUAT	ID No.	S0915347J
Related Vehicle	SHB9831D (Car)	Contact No.	62742038
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned above date, time and location. I picked a passenger up at middle road. After picking him up, he directed me to go straight and subsequently turn right to waterloo street, as he intended to go the opposite direction.

At the junction of middle road and waterloo street, while I was at the right most lane preparing to turn, I stopped my vehicle and was looking out for traffic. Suddenly a black vehicle collided to the front left side of my vehicle.

When I came out of the vehicle, the driver accused me of not signaling my intention to turn right. I pointed at my tail light and showed him that my vehicle's signal had already been indicated. He later accused me of only indicating after the accident. Subsequently, one of his passengers asked him to hurry up settle the issue. He did not leave his name or number and immediately went back to his vehicle and made an illegal left turn to waterloo street.

As my handphone is spoilt, I did not manage to take any photos of his car. I tried asking my main hirer if he was able to extract the accident footage, however as the recording was over 3 hrs, it has already been recorded over. I am not sure if there are any witnesses or any cameras at the area.

I am lodging this report for police assistance to look into the matter.



**SINGAPORE
POLICE FORCE**



T/20180213/2069

Police Station Of Origin:
Kim Seng NPP
5 Beo Crescent SINGAPORE 169981
Tel No: 1800-2718999

3 of 3

Report No. T/20180213/2069

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Staff Sgt JEREMY TEO WEN CHI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / G1AY

Staff Sgt ANG SENG PING

Contact No.: 65476430

SN 065

Authentication Stamp

NP158

SIGNATURE

Signature Of Informant:

Ng. Jye. Huat

Date/Time:

13/02/2018 13:54

Classification Of Case:

250 082

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3878K
Vehicle Details	
Vehicle No.:	SHB9831D
Vehicle to be Exported:	Yes
Intended De-registration Date:	14 Feb 2018
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2013
Engine No.:	M9R8839C000323
Chassis No.:	VF1ABL15AUC273328
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	20 Aug 2013
First Registration Date:	20 Aug 2013
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Aug 2021
PARF Rebate Amount:	\$9,373.00
Intended COE Rebate Details	

COE Expiry Date:	19 Aug 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$54,952.00
COE Rebate Amount:	\$24,133.00
Total Rebate Amount:	\$33,506.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 14 Feb 2018

OK

TRANS-CAB AUTO SERVICES PTE LTD

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHB9831D -**AAD1802-144***Not Authenticated
L1 Log & 3350p*

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

SHB9831D - JHOW

VF1ABL15AUC273328

RENAULT

LATITUDE

12.02.2018

ECICS**PART****LIST**

1	1	BUMPER COVER FRT	\$	<i>Bu</i>	1,259.42	✓
2	1	BUMPER SPOILER FRT	\$	<i>Sn</i>	181.75	X
3	1	BUMPER FOG LAMP GRILLE LH	\$	<i>cm</i>	207.22	✓
4	1	BUMPER RETAINER FRT LH	\$	<i>DIT</i>	151.41	✓
5	1	BUMPER RETAINER FRT RH	\$	<i>Sn</i>	151.41	} X
6	1	BUMPER SUPPORT FRT LH	\$	<i>Sn</i>	123.88	
7	1	BUMPER SUPPORT FRT RH	\$	<i>Sn</i>	123.88	
8	1	BUMPER BEAM FRT	\$	<i>R</i>	914.08	
9	1	RADAITOR GRILLE	\$	<i>Sn</i>	1,707.78	
10	1	RADAITOR GRILLE BADGE 'RENAULT'	\$	<i>Sn</i>	225.36	
11	1	RADAITOR GRILLE FRAME	\$	<i>Sn</i>	1,353.75	
12	1	FRAME FULL SUPPORT PANEL	\$	<i>Bu</i>	615.90	
13	1	FRAME FULL SUPPORT BRACKET	\$	<i>R</i>	89.79	
14	1	AIR CLEANER LOWER	\$	<i>Sn</i>	352.64	
15	1	AIR CLEANER HOSE	\$	<i>Sn</i>	76.14	} X
16	1	WHEEL HOUSING PANEL FRT LH	\$	<i>R</i>	5,173.47	
17	1	LOWER ARM LH	\$	<i>Sn</i>	685.76	
18	1	KUNCKLE ARM LH	\$	<i>Sn</i>	846.98	
19	1	ABSORBER FRT LH	\$	<i>Sn</i>	360.54	
20	1	AUTO COMPUTER	\$	<i>Sn</i>	5,032.17	
21	1	STEERING PUMP ELECTRIC	\$	<i>Sn</i>	2,306.90	
22	1	BONNET	\$	<i>R</i>	1,941.63	
23	1	HEADLAMP LH	\$	<i>mgim</i>	1,184.43	✓
24	1	HEADLAMP PANEL FRT LH	\$	<i>R</i>	152.15	X
25	1	FENDER PANEL FRT LH	\$	<i>R</i>	783.83	✓
26	1	WHEELARCH FRT LH	\$	<i>Sn</i>	278.84	} X
27	1	DOOR MIRROR LH	\$	<i>Sn</i>	1,483.40	
28	1	DOOR MIRROR GLASS LH	\$	<i>Sn</i>	148.20	
29	1	DOOR MIRROR BACK COVER LH	\$	<i>Sn</i>	218.46	
30	1	DOOR PANEL FRT LH	\$	<i>R</i>	2,844.66	
31	1	DOOR HINGE UPPER LH	\$	<i>R</i>	274.50	
32	1	DOOR HINGE LOWER LH	\$	<i>R</i>	300.55	
33	1	DOOR PANEL REAR LH	\$	<i>R</i>	2,844.66	

TRANS-CAB AUTO SERVICES PTE LTD

AAD1802-144

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHB9831D -

TOTAL	\$	34,395.54
10%	\$	3,439.55
	\$	30,955.99

Specical Nett

1	1SET	FRONT BUMPER CLIP	\$	<i>nn</i> 66.00 ✓
2	1SET	WHEELARCH CLIP LH	\$	<i>nn</i> 66.00 X
3	1	TOW COVER FRT	\$	<i>nn</i> 14.50 X
4	1	CAP HUB LH FRT	\$	<i>nn</i> 35.00 X
5	1	RIM LH FRT	\$	<i>nn</i> 385.00 X
6	1	TYRE LH FRT	\$	<i>nn</i> 330.00 X
7	1SET	BUMPER SUPPORT FRT CLIP LH	\$	<i>nn</i> 9.80 X
8	1SET	BUMEPR RETAINER FRT CLIP LH	\$	<i>nn</i> 12.50 X
9	1	DOOR STICKER "Trans-cab"	\$	<i>nn</i> 80.00 X
10	1	DOOR STICKER "Classic"	\$	<i>nn</i> 30.00 X

TOTAL	\$	1,028.80
TOTAL PARTS	\$	31,984.79

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same

\$ 2,800.00 *4401*

To Check Electrical Lighting Concerned.

\$ 170.00 *201*

Putty and spray painting of the affected portion.

\$ 3,000.00 *4401*

To check steering geometry and computer wheel alignment

\$ *nn* 220.00 X

Towing Fees

\$ *nn* 120.00 X

To transfer of tire, rim and on wheel balancing.

\$ *nn* 170.00 X

To rust-proofing of the affected areas.

\$ 170.00 *301*

Labour charge to mount and dismount vehicle on jig bench, to facilitate repair.

\$ *nn* 380.00 X

To Transfer Of Fender Fittings, Attachments And Perform Water Seepage Test.

\$ *nn* 170.00 X

TRANS-CAB AUTO SERVICES PTE LTD**AAD1802-144**

NO.2 ANG MO KIO ST63 SINGAPORE 569111

TEL NO. 6287 6666 FAX NO. 6257 1330

CO/GST REG NO. 201019626G

SHB9831D -

To dismantle and refit front end suspension,
undercarriage parts, final checking and
testing.

\$ *nn* 380.00 *X***TOTAL \$ 7,580.00****Over All Total \$ 39,564.79****(PARTS BY PARTS) Repair Days****~~10~~ Days***2 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:




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				
ECICS LTD		Ref : CS/ICS18003600/Ktd3e2		
7 TEMASEK BOULEVARD #10-01 SUNTEC TOWER ONE SINGAPORE 038987		Date : 16-03-2018		
		Code : ICS		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLC 2554Y	Veh. Inspected	SHB 9831D	
Policy No.		Coverage (\$)	0.00	
Claim No.	DMPU1800026H/LC	Excess (\$)	0.00	
Assign From	LIONEL CHUA	Assign Date	14/02/2018	
2. Vehicle Particulars & Condition				
Make & Model	RENAULT LATITUDE (A)	c.c	1995	
Engine No.	HIDDEN	Year of Reg.	2013	
Chassis No.	VF1ABL15AUC273328	Colour	METALLIC WHITE / RED	
Odometer	523383	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	215/60 R16	FALKEN	6 mm	
L/H Front Tyre	215/60 R16	FALKEN	6 mm	
R/H Rear Tyre	215/60 R16	FALKEN	6 mm	
L/H Rear Tyre	215/60 R16	FALKEN	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	12/02/2018	Inspection Date	19/02/2018	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 Working Days		

**LKK Auto Consultants Pte Ltd**

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHB 9831D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER COVER FRT	BUCKLED	1,259.42	1,259.42
1	BUMPER SPOILER FRT	SERVICEABLE	181.75	-
1	BUMPER FOG LAMP GRILLE LH	CRACKED	207.22	207.22
1	BUMPER RETAINER FRT LH	DISTORTED	151.41	151.41
1	BUMPER RETAINER FRT RH	SERVICEABLE	151.41	-
1	BUMPER SUPPORT FRT LH	SERVICEABLE	123.88	-
1	BUMPER SUPPORT FRT RH	SERVICEABLE	123.88	-
1	BUMPER BEAM FRT	TO REPAIR SEE LABOUR	914.08	-
1	RADIATOR GRILLE	SERVICEABLE	1,707.78	-
1	RADIATOR GRILLE BADGE 'RENAULT'	SERVICEABLE	225.36	-
1	RADIATOR GRILLE FRAME	SERVICEABLE	1,353.75	-
1	FRAME FULL SUPPORT PANEL	SERVICEABLE	615.90	-
1	FRAME FULL SUPPORT BRACKET	TO REPAIR SEE LABOUR	89.79	-
1	AIR CLEANER LOWER	SERVICEABLE	352.64	-
1	AIR CLEANER HOSE	SERVICEABLE	76.14	-
1	WHEEL HOUSING PANEL FRT LH	TO REPAIR SEE LABOUR	5,173.47	-
1	LOWER ARM LH	SERVICEABLE	685.76	-
1	KNUCKLE ARM LH	SERVICEABLE	846.98	-
1	ABSORBER FRT LH	SERVICEABLE	360.54	-
1	AUTO COMPUTER	SERVICEABLE	5,032.17	-
1	STEERING PUMP ELECTRIC	SERVICEABLE	2,306.90	-
1	BONNET	TO REPAIR SEE LABOUR	1,941.63	-
1	HEADLAMP LH	MTG CRACKED	1,184.43	1,184.43
1	HEADLAMP PANEL FRT LH	TO REPAIR SEE LABOUR	152.15	-
1	FENDER PANEL FRT LH	BENT	783.83	783.83
1	WHEELARCH FRT LH	SERVICEABLE	278.84	-
1	DOOR MIRROR LH	SERVICEABLE	1,483.40	-
1	DOOR MIRROR GLASS LH	SERVICEABLE	148.20	-
1	DOOR MIRROR BACK COVER LH	SERVICEABLE	218.46	-
1	DOOR PANEL FRT LH	TO REPAIR SEE LABOUR	2,844.66	-

Report Ref No. CS/ICS18003600/Ktd3e2



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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	DOOR HINGE UPPER LH	TO REPAIR SEE LABOUR	274.50	-
1	DOOR HINGE LOWER LH	TO REPAIR SEE LABOUR	300.55	-
1	DOOR PANEL REAR LH	TO REPAIR SEE LABOUR	2,844.66	-
	LESS 10% DISCOUNT		-3,439.55	-358.63
			30,955.99	3,227.68
	<u>SPECIAL NETT ITEMS</u>			
1	SET FRONT BUMPER CLIP (SN)	NECESSARY	66.00	66.00
1	SET WHEELARCH CLIP LH (SN)	NOT NECESSARY	66.00	-
1	TOW COVER FRT (SN)	SERVICEABLE	14.50	-
1	CAP HUB LH FRT (SN)	SERVICEABLE	35.00	-
1	RIM LH FRT (SN)	SERVICEABLE	385.00	-
1	TYRE LH FRT (SN)	SERVICEABLE	330.00	-
1	SET BUMPER SUPPORT FRT CLIP LH (SN)	NOT NECESSARY	9.80	-
1	SET BUMPER RETAINER FRT CLIP LH (SN)	NOT NECESSARY	12.50	-
1	DOOR STICKER "TRANS-CAB" (SN)	NOT NECESSARY	80.00	-
1	DOOR STICKER "CLASSIC" (SN)	NOT NECESSARY	30.00	-
			1,028.80	66.00
	<u>LABOUR</u>			
	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF BUMPER BEAM FRT, FRAME FULL SUPPORT BRACKET, WHEEL HOUSING PANEL FRT LH, BONNET, HEADLAMP PANEL FRT LH, DOOR PANEL FRT LH, DOOR HINGE UPPER LH, DOOR HINGE LOWER LH AND DOOR PANEL REAR LH.		2,800.00	400.00
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		3,000.00	440.00
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TOWING FEES.	NOT NECESSARY	120.00	-
	TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	-
	TO RUST-PROOFING OF THE AFFECTED AREAS.		170.00	30.00
	LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH, TO FACILITATE REPAIR.	NOT NECESSARY	380.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO TRANSFER OF FENDER FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
	TO DISMANTLE AND REFIT FRONT END SUSPENSION, UNDERCARRIAGE PARTS, FINAL CHECKING AND TESTING.	NOT NECESSARY	380.00	-
			7,580.00	890.00
GRAND TOTAL			39,564.79	4,183.68
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,350.00

Report Ref No. CS/ICS18003600/Ktd3e2

KONG SENG CHEONG

Licensed Appraiser

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