

ASS. REC. BY:

REF: CS/FWD18004083/A9d3⁵

Special Instruction:

Surveyor:

Adrian

ASSIGNMENT (Office)

From (Person):

clarkli

of

FWD

Date/Time: 11/3/18 @ 5:02pm

Estimated Cost:

Bill to:

OD (TP) WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SJW 5423R

Insured:

SLF 2614S

at Workshop m/s

Leang Automotive

Tel:

90286516

of

No. 1 Kaki Bukit Ave 6 # 01-68

Policy No:

Claim No:

1201800002754

Sum Insured:

Excess:

Make of Veh:

D.O.A. 28/2/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

'wp'

H.O.D. Endorsement:

Date/Time:

12:18pm 2/3/18

Person Contacted:

Mr. Leang

Vehicle: IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SJW 5423R - (CG / AIG / 2024446 / Dbl / 2w2 D.O.A: 17/12/2012
	SLF 2614S - X
	US \$5600, 6 days (Red \$ 5321.90, 49%)

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

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

Veh No: STWS423R Yr Regn: 2010 MarchType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Kia Cerato Forte c.c. 1591Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 168515 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KNAFWH1MAS186101Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 215/45R17R: 215/45R17BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 01/03/18Survey held at: LeamyDes. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

TP FWD.

RECEIVED 2-6 MAR 2018

Date/Time, File Pass to?

17/6/18 Thiruvananthapuram

Date/Time, File Return to?

2)

☐ : Preli. Report☐ : Final ReportDays Of Repair: 6Resurvey No. of Trip: 1

Survey Fee:

Transportation:

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

) \$ + RS \$

) Photos

) Others

TOTAL

Report Format :

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

TP56002505050



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

FWD SINGAPORE PTE LTD

Ref : CS/FWD18004083/Aqd3

6 TEMASEK BOULEVARD
#18-01 SUNTEC TOWER 4 SINGAPORE 038986

Date : 02-03-2018



Code : FWD

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLF 2614S	Veh. Inspected	SJW 5423R
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	CLARA LI	Assign Date	02/03/2018

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	09/11/2017	Inspection Date	01/03/2018
Survey held at	LEANG AUTOMOTIVE BLK 1 KAKI BUKIT AVE 6 #01-68 AUTOBAY@ KAKI BUKIT SINGAPORE 417883		

5a. Remarks

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

Catherine Chong (LKK Auto)

From: motorclaims.sg@fwd.com
Sent: Thursday, 1 March, 2018 5:02 PM
To: assignments@lkkauto.com; sur@lkkauto.com; admin-a@lkkauto.com; admin-d@lkkauto.com
Subject: FW: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Hi LKK team,

Please refer to the email below and liaise with TP repairer for PRS.

Please create the case in Merimen.

Thank you.

Kind Regards

Clara Li

Senior Executive, Claims

FWD Singapore Pte. Ltd.

6 Temasek Boulevard, #18-01 Suntec Tower Four, Singapore 038986

T (65) 6727 5722

E clara.li@fwd.com

W fwd.com.sg



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--	--	--	---

From: bonnie kwok [mailto:litigation@bonniekwok.com]

Sent: Thursday, 1 March, 2018 4:44 PM

To: Motor Claims SG - SG Common

Subject: Re: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Dear Sirs,

Our client agrees to LKK Auto Consultants Pte Ltd as the Single Joint Expert (SJE).

Please let us have their report in due course.

Kindly request for the SJE to contact the repairers, M/s Leang Automotive at 9028 6516 to make the necessary arrangements.

Regards,
ST

BONNIE KWOK LLC

Advocates & Solicitors
101A Upper Cross Street
#08-12 People's Park Centre
Singapore 058358
TEL: 6536 6026
FAX: 6536 2279
email : litigation@bonniekwok.com
GST Reg. No.: 201203547Z

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On 1 March 2018 at 15:08, <motorclaims.sg@fwd.com> wrote:

WITHOUT PREJUDICE

Dear Sir/ Madam,

We refer to your letter dated 01 March 2018 of the PRI Notice of your client's vehicle SJW5423R.

Please find our panel surveyors as follows: -

1. LKK AUTO CONSULTANTS PTE LTD
2. INFINITI APPRAISAL SERVICE
3. AJAX INSPECTION SERVICES PTE LTD
4. Appraisals Associates Pte Ltd
5. VICOM Ltd

If you are not agreeable to any of the above, we reserve our rights to request for pre-repair inspection of your client's vehicle.

We look forward to receiving your reply.

Thank you.

Kind Regards

Clara Li

Senior Executive, Claims

FWD Singapore Pte. Ltd.

6 Temasek Boulevard, #18-01 Suntec Tower Four, Singapore 038986

T (65) 6727 5722

E clara.li@fwd.com

W fwd.com.sg



	Endowment Plan Get the biggest guaranteed return for a 3 year plan available online. Limited time offer!		2.02% p.a. fwd.com.sg save now
---	---	--	---

From: bonnie kwok [mailto:litigation@bonniekwok.com]

Sent: Thursday, 1 March, 2018 12:34 PM

To: Motor Claims SG - SG Common; SG Corporate Contact

Subject: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Urgent

Dear Sirs,

We refer to the above matter.

We hereby give you 2 days' notice to conduct a pre-repair inspection of vehicle SJW 5423 R at M/s Leang Automotive, No. 1 Kaki Bukit Avenue 6 #01-68 Singapore 417883.

Regards,
ST

--

BONNIE KWOK LLC

Advocates & Solicitors

101A Upper Cross Street

#08-12 People's Park Centre

Singapore 058358

TEL: 6536 6026

FAX: 6536 2279

email : litigation@bonniekwok.com

GST Reg. No.: 201203547Z

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Messages and attachments are scanned for all viruses known. However, you are advised that you open any attachments at your own risk. If this message contains password-protected attachments, the files have NOT been scanned for viruses by our mail domain. Please always scan for viruses before opening any attachments.

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The email and any attachments transmitted with it are private and confidential and intended solely for the use of the individual or entity to whom they are addressed. If you have received this email in error, please notify the sender immediately and delete this email and any attachments from your system. You should not use, disclose, copy or store this email and any attachments.

Messages and attachments are scanned for all viruses known. However, you are advised that you open any attachments at your own risk. If this message contains password-protected attachments, the files have NOT been scanned for viruses by our mail domain. Please always scan for viruses before opening any attachments.

Shiau Chan (LKKAUTO)

From: motorclaims.sg@fwd.com
Sent: Friday, 23 March 2018 4:13 PM
To: Shiau Chan (LKKAUTO); assignments
Cc: SUR
Subject: RE: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Hi Shiau Chan,

It is the same with OD claim number in Merimen – 1201800002754.

Thank you.

Regards,
Clara

From: Shiau Chan (LKKAUTO) [mailto:siewsc@lkkauto.com]
Sent: Friday, 23 March, 2018 4:10 PM
To: Motor Claims SG - SG Common; assignments
Cc: SUR
Subject: RE: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Dear Clara,

Kindly provide us the claim number of above mentioned.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAUTO)
Sent: Friday, 2 March 2018 12:25 PM
To: motorclaims.sg@fwd.com; assignments <assignments@lkkauto.com>
Cc: SUR <sur@lkkauto.com>
Subject: RE: Urgent: PRE-REPAIR INSPECTION: Your Vehicle: SLF 2614 S; LeangAuto's Vehicle: SJW 5423 R; ACCIDENT INVOLVING SJW 5423 R & SLF 2614 S ON 28 February 2018

Dear Sir/Mdm,

Thank you for the assignment.

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

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	01/03/2018 13:49
Date Of Accident	28/02/2018 08:30
Exact Location Of Accident	ALONG BUKIT TIMAH EXPRESSWAY TWD WOODLANDS AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW5423R
Insured/Policyholder	
Name Of Registered Owner	CHAN CHOON HENG RAYMOND
NRIC No	S8017879D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96912318
Alternative Phone No	OFFICE-96912318

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5070445238-02
Cover Note Number	

Driver

Name of Driver	TAN YING YAN
NRIC No	S8307146Z
Date Of Birth	25/02/1983
Occupation	INDOOR
Date Of Driving Pass	01/09/2008
Driving Experience	9 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96912318
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	APT BLK 216B COMPASSVALE DRIVE #05-556
Postcode	542216
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF2614S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	TAN YING YAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJW5423R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	APT BLK 216B COMPASSVALE DRIVE #05-556
Postcode	542216

Sketch Plan Pg. 1


IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

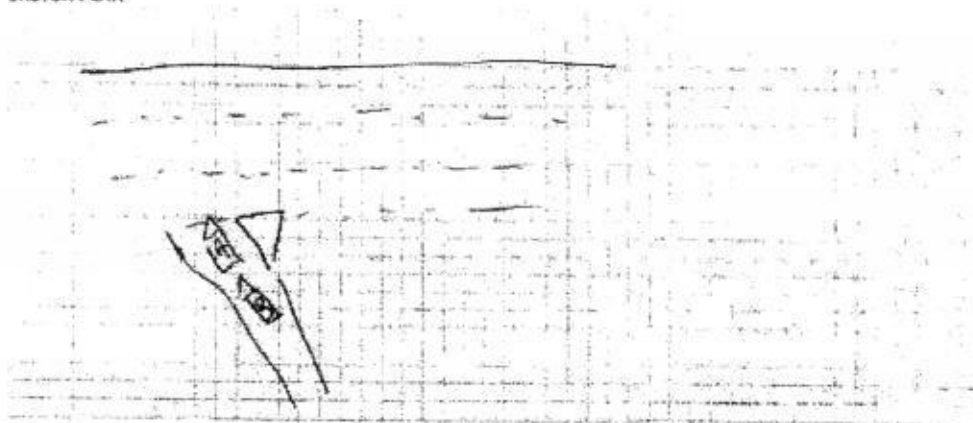
Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See 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

Recording Centre Personnel's Signature
Name: _____
NRIC/FIN No: _____



SINGAPORE POLICE FORCE



T/20180228/2134

1 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180228/2134

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/02/2018 20:30		Vide Report No.:		Station Diary No.: 144	
Informant's Particulars					
Name of Informant: TAN YING YAN			Address: APT BLK 216B COMPASSVALE DRIVE #05-556 SINGAPORE 542216		
ID Type / ID No.: NRIC NO / S8307146Z			Contact No.: Home/Office: Mobile: 96912318		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 35	Date of Birth: 25/02/1983	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: QUALITY SPECIALIST			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/02/2018 08:30	Type of Location: Filter lane
Location: Along Road 1 Traveling Toward Road 2 BUKIT TIMAH EXPRESSWAY WOODLANDS AVENUE 3 Bukit Timah Expressway (BKE) filter out (filter lane) to Woodlands Ave 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJW5423R	Car	KIA	Cerato	Grey	Slightly Damaged	0
SLF2614S	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJW5423R	NTUC Income Insurance Co-Operative Limited	5070445238-02	01/04/2017	31/03/2018



**SINGAPORE
POLICE FORCE**



T/20180228/2134

2 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180228/2134

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN YING YAN	ID No.	S8307146Z
Related Vehicle	SJW5423R (Car)	Contact No.	96912318
Hospital/Clinic	ISLAND FAMILY CLINIC (FERNVALE)	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	28/02/2018	Date Discharge	28/02/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the above mentioned date, time and place. I was travelling along BKE on my grey colour vehicle bearing the registration number SJW5423R and enter into and exit to a filter lane towards Woodlands Avenue 3. Upon reaching the said filter lane, I stop my said vehicle and waited behind the stop line as to there was an on coming vehicle from my right side. While waiting for the vehicle to pass, there was a hard impact coming form the rear of my said vehicle. I then notice that a vehicle bearing SLF2614S had hit onto the rear of my said vehicle.

After the assessment of our vehicles, I manage to exchange particulars with the other party and the driver is known as one, Yong June Nie, Gina, S8021019A, Hp: 82016453. I then proceed to a family clinic known as Island family Clinic (Fernvale) located at Blk 473A Fernvale Street #01-03, after work as I felt neck area and obtained 3 days medical certificate (MC) fated from 28/02/2018 till 02/03/2018.

I wish to state that I have an in car vehicle camera installed. However, the camera only pointed to the front of my vehicle. I also wish to state that my vehicle sustain dent on the rear side my vehicle. I further wish to state that I do not know the cost of damage to my vehicle.



**SINGAPORE
POLICE FORCE**



T/20180228/2134

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No. T/20180228/2134

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:

F /

Sgt 2 MOHAMMAD HUSAINI BIN MOHAMMAD
YUSOFF

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 SITIMARSITA BINTE BOHARI

Contact No.: 65476219

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

28/02/2018 20:30

Classification Of Case:

TP / AEIT /
SSI 2 SITIMARSITA BINTE BOHARI

SJW 5423R.

Date

No.

Kin Ceruto Forte.

KNAFW411MAS186101

Rees Bumper Deformed	586.50	✓
Rees Bumper Clips New	30	✓
Rees Bumper Side Holder x02 New	32.6x2=65.20	✓
Rees Bumper Lower Spokes Deformed	980(SN) 700(SN)	
Rees Bumper Sponge Dehd	174	✓
Rees Bumper Reinforcement crinkled	279	✓
Rees Bumper Reinforcement Stay x02 Bert	135x2=270	✓
Rees Bumper Reinforcement Bracket x05. Dmgd	24x5=120	✓
Reverse Sensor x04 Dmgd	220x4=880 250(SN)	
Rees End Panel Dented	385	✓
Rees End Panel Top Garnish Deformed	89.50	✓
Rees End Panel Sealant New	60(SN)	✓
Taillamp x02 Crinkled	246x2=492	✓
Taillamp Sponge Gasket x02 New	20x2=40	✓
Bootlid Buckled	685	✓
Bootlid Lock Dmgd	104.70	✓
Bootlid Lock Sensor Crinkled	81.90	✓
Bootlid Weatherstripe Lit	89.90	✓
Bootlid Zines Trim 2 New	168	X
Bootlid Zines Trim Clips	30	X
Bootlid Reflector x02 New	130.9x2=261.80	+
Bootlid Reflector Sponge Gasket x02 New	20x2=40	+
Kia Logo	46	✓
Ceruto Wording	38	✓
Forte Wording	37	✓
Cycle and carriage Logo	32	✓
Rees Fender Zines Trim x02 2 New	268.5x2=537	+
Rees Fender Zines Trim Clips	60	+
Rees Exhaust Pipe Repair	686	+
Rees Exhaust Mounting New	44	+



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

FWD SINGAPORE PTE LTD

Ref : CS/FWD18004083/Aqd3s2

6 TEMASEK BOULEVARD
#18-01 SUNTEC TOWER 4 SINGAPORE 038986

Date : 02-04-2018



Code : FWD

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SLF 2614S	Veh. Inspected	SJW 5423R
Policy No.		Coverage (\$)	0.00
Claim No.	1201800002754	Excess (\$)	0.00
Assign From	CLARA LI	Assign Date	01/03/2018

2. Vehicle Particulars & Condition

Make & Model	KIA CERATO FORTE	c.c	1591
Engine No.	HIDDEN	Year of Reg.	2010
Chassis No.	KNAFW411MA5186101	Colour	GREY
Odometer	168515	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/45R17	DUNLOP	6 mm
L/H Front Tyre	215/45R17	DUNLOP	6 mm
R/H Rear Tyre	215/45R17	DUNLOP	6 mm
L/H Rear Tyre	215/45R17	DUNLOP	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
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5. General Information

Accident Date	28/02/2018	Inspection Date	01/03/2018
Survey held at	LEANG AUTOMOTIVE BLK 1 KAKI BUKIT AVE 6 #01-68 AUTOBAY@ KAKI BUKIT SINGAPORE 417883		

5a. Remarks

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

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	6 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJW 5423R

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER	DEFORMED	586.50	586.50
1	REAR BUMPER CLIPS	NECESSARY	30.00	30.00
2	REAR BUMPER SIDE HOLDER @ \$32.60	NECESSARY	65.20	65.20
1	REAR BUMPER SPONGE	DEFORMED	174.00	174.00
1	REAR BUMPER REINFORCEMENT	CRACKED	279.00	279.00
2	REAR BUMPER REINFORCEMENT STAY @ \$135.00	BENT	270.00	270.00
5	REAR BUMPER REINFORCEMENT BRACKET @ \$24.00	DAMAGED	120.00	120.00
1	REAR END PANEL	DENTED	385.00	385.00
1	REAR END PANEL TOP GARNISH	DEFORMED	89.90	89.90
2	TAILLAMP @ \$246.00	CRACKED	492.00	492.00
2	TAILLAMP SPONGE GASKET @ \$20.00	NECESSARY	40.00	40.00
1	BOOTLID	BUCKLED	685.00	685.00
1	BOOTLID LOCK	DAMAGED	104.70	104.70
1	BOOTLID LOCK SENSOR	CRACKED	81.90	81.90
1	BOOTLID WEATHERSTRIP	CUT	89.90	89.90
1	BOOTLID INNER TRIM	NOT NECESSARY	168.00	-
1	BOOTLID INNER TRIM CLIPS	NOT NECESSARY	30.00	-
2	BOOTLID REFLECTOR @ \$130.90	NOT NECESSARY	261.80	-
2	BOOTLID REFLECTOR SPONGE GASKET @ \$20.00	NOT NECESSARY	40.00	-
1	KIA LOGO	NECESSARY	46.00	46.00
1	CERATO WORDING	NECESSARY	38.00	38.00
1	FORTE WORDING	NECESSARY	37.00	37.00
1	CYCLE AND CARRIAGE LOGO	NECESSARY	32.00	32.00
2	REAR FENDER INNER TRIM @ \$268.50	NOT NECESSARY	537.00	-
1	REAR FENDER INNER TRIM CLIPS	NOT NECESSARY	60.00	-
1	REAR EXHAUST PIPE	TO REPAIR SEE LABOUR	686.00	-
1	REAR EXHAUST MOUNTING	NOT NECESSARY	44.00	-
1	SPARE TYRE PANEL TOP COVER	DEFORMED	179.00	179.00
	LESS 10% DISCOUNT		-	-382.51
			5,651.90	3,442.59
SPECIAL NETT ITEMS				
1	REAR BUMPER LOWER SPOILER (SN)	DEFORMED	980.00	780.00
4	REVERSE SENSOR @ \$220.00 (SN)	DAMAGED	880.00	250.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR END PANEL SEALANT (SN)	NECESSARY	60.00	60.00
			1,920.00	1,090.00
	LABOUR			
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR EXHAUST PIPE.		1,200.00	1,000.00
	SPRAY PAINTING.		1,400.00	1,200.00
	WIRING.		50.00	30.00
	TO UNDERSEAL.		150.00	50.00
	TO REMOVE REVERSE SENSOR.		100.00	50.00
	TO REMOVE UPHOLSTERY.		150.00	60.00
	TO REMOVE EXHAUST PIPE.		150.00	80.00
	TO TRANSFER BOOTLID FITTINGS.		150.00	60.00
			3,350.00	2,530.00
GRAND TOTAL			10,921.90	7,062.59
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				5,600.00

Report Ref No. CS/FWD18004083/Aqd3s2

ADRIAN LING WAI PING

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

Licensed Appraiser

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