Reference No.: CC3 TMI 800 H358 KVb
Policy Type: OD / TP / TP RES / TL / EVA

Typist

dmin (): Case handler to make sure all Inform	Y-Date	N-Date	Y-Date	N-Date
C	Assign Form Reference No.	~			- 17 - 17 - 17 - 17 - 17 - 17 - 17 - 17
- c	Customer Code				
N	Assign From				
	Assign Date	~			
_ <u>c</u>		· ·			
<u>c</u>	Veh No (Inspected)				
С	Veh No (Insured)	-			
С_	D.O.A				
С	Policy No				
_ <u>c</u>	Claim No				
С	Insurance Authorisation (CA /REV/REP)				
С	Report Type				
C	Weekend Charges	1			
N	Survey held at/Repairer				
<u> </u>	er (): Case handler to make sure t	he surveryor c	ompleted	all required	informa
1) Assign	nment Form				
C C	Vehicle No	~			-
- c	Regn Month/Year	~			
	Vehicle Type	~			
N	Make & Model	~			
N	Engine Capacity. (C.C)				
_ <u>C</u>	Colour	~			
N	Odometer. (Sp.Reading)	~			
_ <u>c</u>	Chassis No	~			
C	General Condition	~			1
N		~			
N	Steering	~			
N	Brake	~			
N-	Modification (Modi)				
<u>c</u>	Tyre Size	~			
N	Tyre Make	~			
<u>C</u>	Tyre Balance				
c	Date of Inspection	-			
N	Survey held				
N	Des.of Damages				
(2) Syste	em - (Views/Merimen)		T		
c	Damaged Vehicle Photographs Uploaded				11.55
(3) Wor	kshop Estimate/Assignment Form		T	1	T
N	ALL Parts condition		1	1	T
C	Market Value for OD cases		-	1	1
A 27	Estimate Repair Cost for PRI (RSI, TMI, MSIG)		1:	1	1
c	Days of repair		-	1	1
	A STATE OF THE STA				
C .	Finalised Amount				
- c	Finalised Amount Re-inspection Cases to Finalize within 5 Days				
- c	Finalised Amount				

Date

Case Handler



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

CALLUM STREE	Policy Particulars	Ref: CC3/TMI18004 Date: 07-03-2018 Code: TMI s:-THIRD PARTY CLAI Veh. Inspected Coverage (\$) Excess (\$) Assign Date			
Insured Veh. Policy No. Claim No. Assign From Make & Model Engine No.	Policy Particulars	Code: TMI s:-THIRD PARTY CLAI Veh. Inspected Coverage (\$) Excess (\$) Assign Date	SHB 7989X 0.00 0.00		
Policy No. Claim No. Assign From Make & Model Engine No.	SKZ 5590M	Veh. Inspected Coverage (\$) Excess (\$) Assign Date	SHB 7989X 0.00 0.00		
Policy No. Claim No. Assign From Make & Model Engine No.		Coverage (\$) Excess (\$) Assign Date	0.00		
Claim No. Assign From Make & Model Engine No.	Vehicle Part	Excess (\$) Assign Date	0.00		
Assign From Make & Model Engine No.	Vehicle Part	Assign Date			
Make & Model Engine No.	Vehicle Part		06/03/2018		
Engine No.	Vehicle Part	ticulars & Condition			
Engine No.					
		c.c	0		
Chassis No.	HIDDEN	Year of Reg.			
ondoord no.		Colour			
Odometer		Steering			
Brakes		Modification			
General					
	Condi	tions of Tyres			
	Size	Make	Balance		
R/H Front Tyre			mm		
			mm		
			mm		
L/H Rear Tyre			mm		
	Descript	ion of Damages			
Entrant (No. 1 14	Gener	al Information			
Accident Date	05/03/2018	Inspection Date	07/03/2018		
Survey held at	TRANS-CAB AUTO SERVICES				
	NO.2 ANG MO KIO ST 63 SINGAPORE 569111				
ISSUED SELECT		Remarks			
FL	R/H Front Tyre L/H Front Tyre R/H Rear Tyre L/H Rear Tyre L/H Rear Tyre Accident Date Survey held at	General Size R/H Front Tyre L/H Front Tyre R/H Rear Tyre L/H Rear Tyre Descript General Accident Date 05/03/2018 Survey held at TRANS-CAB AUTO SERVICES NO.2 ANG MO KIO ST 63 SINGAPORE 569111 FAITHE INSPECTION WAS CONDUCTED ON A"WI	General Conditions of Tyres Size Make R/H Front Tyre L/H Front Tyre L/H Rear Tyre L/H Rear Tyre Description of Damages General Information Accident Date 05/03/2018 Inspection Date Survey held at TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63		

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

Case	FOLDER TRACI	Est Submitted	Adi Assigned	Adi Rpt	Adj Submitted	Ins Auth'ed	Status	
Main	05 Mar 2018	Lac Suprinces	07 Mar 2018 15:05				Pending for Survey Report	
2.55(4)			Edit Adj Rpt	J			Cancel Case	
	Main	Refere	nce	Claim Details		ocuments	Show All	
CI ATM SI	JBFOLDER DET	ATLS	model of the same of the same	THE RESERVE OF THE PERSON NAMED IN		[Created by in	nsurer]	
Insured:	JBI OLDER DE	COMFORT LI	MOUSINE SERV	ICES PTE LTD, Co	o. Reg. No.: 201508	3380W		
Main Clain	nant:	TRANS-CAB	SERVICES PTE L	TD, Co. Reg. No.	: 200303878K			
Vehicle Reg. No.:		SHB7989X	SHB7989X				05/03/2018 09:00 - :59	
Claim Type:		TP / M1801	TP / M1801216		Policy/Cover Note No.:		MG000572 (Comprehensive) Coverage: 29/06/2017 - 28/06/201	
Vehicle Reg. No. (Insured):		SKZ5590M	SKZ5590M		Policy No. (Claimant):			
Verificia Reg. No. (Insuras):					Excess: S\$1,5			
Repairer:		62876666			2, Ang Mo Kio Stre			
Handling 3	nsurer:	Tokio Marin Selvarajoo]	e Insurance Sing	gapore Ltd (HQ) -	Tel: 6221 6111	[Handled by Dille	n Senthilan so	
Claimant's	Insurer:	AXA Insurar	nce Pte Ltd (HQ)	- Tel: 6338 7288			us: [Final Bat	
Adjuster:		due 16/03/	onsultants Pte Lt (2018]	d (HQ) - Tel: 6256	-3561 [Handled	by KENNETH KO	NG] [Final Rpt	
ASSOCIA	TED MAIL REC	EIVED				View All	Compose Case Mail	
There are	no mail for this o	case.						
ALL ASS	OCIATED TASK	(S [⊡]			View All Sear	ch Tasks Create	New Task Complete	
			oup Subject	Handler Assi	gned By Com	pleted On C	reated On Done	

Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Wednesday, 7 March 2018 2:14 PM

To:

'Too Joon Hwa'

Cc:

priscilla@tokiomarine.com.sg; SUR

Subject:

DIRECT SURVEY INSPECTION ON WORKSHOP - TRANS-CAB AUTO SERVICES PTE

LTD, DOA: 5/3/2018, SHB 7989X (TP VEHICLE), SKZ 5590M (OI VEHICLE)

Attachments:

EST.pdf; GIA.pdf; POLICE REPORT.pdf

Dear Shirley,

Please be informed that we had inspected the vehicle SHB 7989X M/s: TRANS-CAB AUTO SERVICES PTE LTD, NO.2 ANG MO KIO ST 63 SINGAPORE 569111 on 6/3/2018

Enclosed herewith a copy of TP's GIA report, police report and estimated cost of repair.

Meanwhile, kindly create claim in merimen for our necessary action.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

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

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3878K
Vehicle Details	
Vehicle No.:	SHB7989X
Vehicle to be Exported:	Yes
Intended De-registration Date:	05 Mar 2018
Vehicle Make:	CHEVROLET
Vehicle Model:	EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO
Primary Colour:	Red
Manufacturing Year:	2011
Engine No.:	Z20S1462164K
Chassis No.:	KL1LA69RJBB123324
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$13,971.00
Original Registration Date:	29 Jan 2013
First Registration Date:	29 Jan 2013
Transfer Count:	0
Actual ARF Paid:	\$13,971.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Jan 2021
PARF Rebate Amount:	\$9,779.00
Intended COE Rebate Details	

COE Expiry Date:	28 Jan 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$60,655.00
COE Rebate Amount:	\$21,950.00
Total Rebate Amount:	\$31,729.00
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 05 Mar 2018

OK

MTCS18030858 / Trans-Cab Services Pte Ltd - HQ ENTRY DATE & TIME: 05/03/2018 15:23 SUBMITTED BY: Candy Kong Wai Kum

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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	05/03/2018 15:23	
Date Of Accident	05/03/2018 08:40	
Exact Location Of Accident	SLE TOWARDS WOODLANDS	
Country/State of Loss	SINGAPORE	
MANAGEMENT WITH THE	DETAILS OF OWN VEHICLE	
Makista Desistantian Number	SHR7989X	

	STRIP CANCELS CONTROL OF THE PARTY OF THE PA	_
Vehicle Registration Number	SHB7989X	

Insured/Policyholder

TRANS-CAB SERVICES PTE LTD Name Of Registered Owner

200303878K Co Reg No

CLAIMS@TRANSCAB.COM.SG Email Address

Mobile Phone No.

OFFICE-62866666 Alternative Phone No.

Vehicle Particulars

CHEVROLET Manufacturer EPICA-2.0 (A) Model

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?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

TAXI

NO

Insurance Company

AXA INSURANCE PTE LTD Name of Insurance Company

THIRD PARTY Type Of Coverage

YES Fleet Policy

VPX/P1680520 Policy Number

Cover Note Number

Driver

LIM LEONG HOCK Name of Driver

S1287544D NRIC No. 12/05/1958 Date Of Birth OUTDOOR Occupation 08/11/1977 Date Of Driving Pass

40 YEARS AND 3 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-97930540 Mobile Number

Fax Number

Contact Number

NOEMAIL EMail Address

BLK 256 SERANGOON CENTRAL DRIVE Address

#05-40

550256 Postcode

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

CHAIN COLLISION

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

NO

ambulance?

YES

Was any other material or property damaged?

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:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

BISHAN NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-5529999 - FAX NO: 65561905

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT: T/20180305/2056

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 Vehicle Make/Model/Colour

SKZ5590M

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

YEE YEONG WAH

NRIC/Passport Number

S1768464G

Contact Number

92471588

Address

Page 2 of 18

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKG3636D

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

SIM BAO CUN

NRIC/Passport Number

S8513809Z

Contact Number

96859957

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

LIM LEONG HOCK

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHB7989X

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Sketch Plan Pg. 1

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.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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:
 - 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.

P

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

ETCH PLAN		111111			
				A	Sn 07989X
5ue					5K-2 5590M
Mondals w	Constant	1		c=	CKV 3/3/0
SCRIBE CIRCUMSTANCES	OF THE ACCIDENT		3.1(4.13.		
- F	15 200_ CH	each P	olive per	×f	
	Name of the second				
				-	
					iiii ee
			2		
	0)=0053340				
189					
ECLARATION					
We declare the foregoing parti	culars are true in every r -	espect.			ady
olicyholder's Signature ate & Time;	Driver's Signature (If driver is not th	e nolicyholder		leporting Ce Name:	ntre Personnel's Signature

GIASMC SketichRenForm_V3

POLICE REPORT Pg. 1





Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

T/20180305/2056

1 of 4

Report No. T/20180305/2056

REPORT O	F A TRAFFIC	ACCIDENT				
Date/Time Report Made: 05/03/2018 13:09			Vide Report No.: Station Diary 55			
Informa	nt's Particu	ulars	建大工作的的权利等的	用門性的機能是最大的		
Name of	Informant: NG HOCK		Address: APT BLK 256 SERANGOON SINGAPORE 550256	CENTRAL DRIVE #05-40		
ID Type / ID No.: NRIC NO / S1287544D			Contact No.: Home/Office: Mobile: 97930540			
Nationality: SINGAPORE CITIZEN		****	Email:			
Sex: Male	Age: 59	Date of Birth: 12/05/1958	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:			

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/03/2018 08:40	Type of Location Straight Road
SELÉTAR EX	Traveling Toward F PRESSWAY	ORE MANDALEXIT		Road Speed Limit:
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control:	1	Fraffic Volume: Heavy
Type of Colli	sion: ving Vehicles - Head	d To Rear		Anyone conveyed by ambulance: No

Vehicle No.	Type	Make	Model	Color	Condition.	No of Passenge
SHB7989X	Car	CHEVROLET	EPICA :	Red	Seriously Damaged	1
SKG3636D	Car	AUDI	A5	Black		0
SKZ5590M	Car	TOYOTA	HARRIER	White		0





2 of 4

7

Report No. T/20180305/2056

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

CONTINUATION OF REPORT

any recestnan in	volved: No					A STREET STANFORD
No. of Pedestrians			Use of Ped	estrian	Crossi	ng: NA
Driver War	可见。这是 4 处表	域和的海岸	美国的			
Name	LIM LEONG HOCK			ID No.		S1287544D
Related Vehicle	SHB7989X (Car)			Contact No.		97930540
Hospital/Clinic	Interredical 24 Th Olinio					Class: 2B,2A,2,3,4 Date of Expiry: NIL
D 1 T 1	05/03/2018		Date Disci			/2018
Date Treatment	ted Medical Leave	05	Degree of	Injury	Slight	
		THE REAL PROPERTY.	CARL PROPERTY	1		WE THE THE WAY IN
Driver Name	SIM BAO CUN			ID No.		S8513809Z
Related Vehicle	SKG3636D (Car)			Contact No.		96859957
Hospital/Clinic	NIL			Class Driving Licence Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge NIL		
No. of Davis gran	ted Medical Leave	NIL	Degree of		NIL	
Driver	THE WHOLE STATE OF THE	CONTRACTOR OF	ALCOHOLD PROPERTY.			是以"安徽"从"Alguatific"
Name	YEE YEONG WAH	111111111111111111111111111111111111111		ID No		S1768464G
Related Vehicle	SKZ5590M (Car)		Contact No.		92471588	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	***	Date Dis	charge	NIL	
Date Treatment	nted Medical Leave	NIL	Degree o			

Brief Details.

On 05.03.2018 at about 0840hrs, I was driving my taxi (SHB7989X) along lane 1 of SLE towards Woodlands. The vehicle in front of me stopped just before Mandai exit as such I came to a stop too. Moments later, I suddenly felt an impact from the rear. I exited from my taxi to make a check and discovered serious damages to the rear portion of the vehicle. I wish to state that I had noted the vehicle behind me (SKX5590M) was also stationery behind me before the impact. I then discovered that a third vehicle had hit the vehicle behind me, causing it to be pushed forward and hitting into my vehicle.

There was one passenger in my taxi and neither she nor me required medical attention at that time. I

POLICE REPORT Pg. 1





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757

Report No. T/20180305/2056

Tel No: 1800-5529999

CONTINUATION OF REPORT

later visited the clinic where I was given 5 days of MC.





1...7

4 of 4

Police Station Of Origin: Bishan N.P.C

Report No. T/20180305/2056

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

the certificate with you now, please fax a copy to 65474885 stating the report number as reference. Signature Of Informant: Signature Of Officer Recording The Report Sgt 2 REEMA KAUR SANDHU Date/Time: Signature Of Interpreter: 05/03/2018 13:09 Not applicable Classification Of Case: Officer In Charge Of Case: TP / AEIT / SI DZUL HAIRIE BIN RAMLI Contact No.: 65476220 SINGAPORE POLICE FORCE SN 061 Authentication Stamp NP168 SIGNATURE

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have

AAD1803-037

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

SHB7989X - TOKIO

Nos Nothaniel

Vehicle No.: Chassis No.: Vehicle Make: Vehicle Model: Date of Accident: Third Party Insurer: SHB7989X - CANDY KL1LA69RJBB123324 CHEVROLET EPICA 2.0 05.03.2018 TOKIO

		PART		LIST
1	1	Rear Bumper	\$	B ₁ 1,202.00
2	1	Rear Bumper Beam	S	By 239.94 —
3	1	Rear Bumper Centre Absorber	\$	CM 260.00 -
4	1	Rear Bumper Side Retainer RH	\$	CM 68.76
5	1	Rear Bumper Side Retainer LH	\$	5~ 68.76 ×
6	1	Rear Bumper Reflectors RH	\$	Bn 119.74
7	1	Rear Bumper Reflectors LH	\$	∫ 119.74 X
8	1	Rear Bumper Tow Hook Cover	\$	1 93.00 X
9	1	Rear Luggage Floor Panel	\$	N 973.00 X
10	1	Rear Luggage Floor Panel Insulator	\$	A~ 63.50 X
11	1	Rear Luggage Floor Panel Trim Board	\$	√ 378.00 X
12	1	Rear End Panel Outer	\$	Ry 623.76
13	1	Rear End Panel Inner Trim	\$	Diy 263.84
14	1	Bootlid	\$	By 973.00 —
15	1	Bootlid inner trim board	\$	CM 400.00 - 100
16	1	Bootlid Weatherstrip	\$	Gr 344.28 50/10
17	1	Bootlid Lock - Top	\$	NJ 466.56 —
18	1	Bootlid 'CHEVROLET' Badge	\$	Na 120.62
19	1	Bootlid Logo	\$	138.84 —
20	1	Bootlid 'EPICA LT' Badge	\$	Nex 119.84 -
21	1	Bootlid Reflector Centre	\$	CM 217.97 -
22	1	Bootlid Reflector RH	\$	CM 128.40 -
23	1	Bootlid Reflector LH	\$	CPM 128.40 -
24	1	Bootlid Hinge RH	\$	R 120.00 X
25	1	Bootlid Hinge LH	\$	R 120.00 ⊀
26	1	Rear Tail Lamp RH	\$	Br 479.30
27	1	Rear Tail Lamp Panel RH	\$	By 359.00
28	1	Rear Tail Lamp LH	S	Cv 479.30 -
29	1	Rear Tail Lamp Panel LH	\$	₹ 359.00 ×
30	1	Rear Exhaust Box (Muffler A-EXH,RR)	\$	↑ 1,110.00 X

NO.2 AN TEL NO CO/GST	NG MO K , 6287 66 REG N	AUTO SERVICES PTE LTD (IO ST63 SINGAPORE 569111 666 FAX NO. 6257 1330 O. 201019626G			AAD1803-037	
SHB79	89X - T	OKIO				
				ď.	Bu 1,145.00 -	
31	1	Rear Fender RH		\$		
32	1	Rear Fender Inner Trim RH		\$	CM 418.44 —	
33	1	Rear Fender LH		\$	M 1,145.00 ★	
34	1	Rear Fender Inner Trim LH		\$	n 418.44 X	
			TOTAL	\$	13,665.43	
			10%	\$	1,366.54	
			55	\$	12,298.89	
		Specical Nett	-	***		
					P	
1	1Set	Licence Plate With Holder		\$	Su 60.00 X	
2	1Set	Bootlid inner trim board Clip		\$	Na 40.00 -	
3	1Set	Rear Bumper Parking Sensor		\$	nd 300.00 -	
4	1Set	Rear Bumper Fastener Clip		\$	Ne 44.00 -	
5	1Set	Rear Fender Inner Trim Clip LH		\$	70.00 €	, V
6	1Set	Rear Fender Inner Trim Clip RH		\$	na 30.00 -	
7	1Set	Rear Bumper End Dust Cover Clip		\$	30.00 X	
8	1	Rear Boot Sticker 'Trans-cab'		\$	na 30.00 —	
9	1	Rear Boot Sticker '6555-3333'		\$	na 30.00 -	
10	1	Rear Exhaust Mounting		\$	∫~ 10.00 X	
11	2	Rear Windscreen Sealant		\$	Na 80.00 80.	
12	1	Rear Windscreen Inner Sponge Seal		\$	Mer 100.00 30s	~
13	1	Spare Tyre		\$	S≥ 180.00 ×	
14	1	Spare Wheel Rim		\$	<i>I</i> 126.74 ^X	
			TOTAL	\$	1,090.74	
		TOT	AL PARTS		13,389.63	
		Panel Beating, Knocking And Straigh			.0	2
		Necessary Portion, Remove And Rene	ewal Of		120	1
		Parts, Adjust And Realign The Same		\$	5,400.00	
		To Check Electrical Lighting Concern	ed.	\$	170.00 20	1
		To check Electrical Eighting Contests		276 1111		

To Rust-Proofing Of The Affected Areas.

Putty And Spray Painting Of The Affected

Portion.

170.00 Pag

5,350.00 2000

\$

TRANS-CAB AUTO SERVICES PTE LTD

AAD1803-037

NO.2 ANG MO KIO ST63 SINGAPORE 569111 TEL NO. 6287 6666 FAX NO. 6257 1330 CO/GST REG NO. 201019626G

SHB7989X - TOKIO

TOTAL	\$ 2	6,219.63	-
	\$	2,830.00	_
To check steering geometry and computer wheel alignment	\$ N	220.00	X
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$ 4	380.00	X
To transfer of Fender fittings, attachments and perform water seepage test.	\$ Repeated	170.00	X
Towing fees	\$	120.00	50
To transfer of boot fittings and conduct water seepage test.	\$	170.00	601
To Remove And Refit Rear W/Screen Glass To Facilitate Bodywork Repair.	\$	170.00	120
To transfer of luggage floor panel fittings and conduct water seepage test.	\$	170.00	100
To transfer of end panel fittings and conduct water seepage test.	\$	170.00	2,
To reinstall rear bumper parking sensor.	\$	170.00	601

Repair Days

20 Days Sday,

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey beforefafter 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

LKK Auto Consultants Pte Ltd (Co. Reg. No: 199507198R)

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:

CC3/TMI18004358/KVBN2

12/03/2018

REFERENCE

Handling Insurer:

Tokio Marine Insurance Singapore Ltd

Policy No:

MG000572

Claimant Vehicle No:

SHB7989X

Insured Vehicle No:

SK75590M

Date of Loss:

05/03/2018

Nature of Claim:

TP

Claim No: M1801216

DESCRIPTION & IDENTIFICATION OF VEHICLE

SHB7989X

Make & Model:

CHEVROLET EPICA, 2.0 (A) 29/01/2013 (Man. Year: 2011) Engine No: Chassis No: Odometer:

Z20S1462164K

690478 km

KL1LA69RJBB123324

Reg. Date: Colour:

Red/White

1991 cc

Market Value/New Car Price:

N/A

Sum Insured (S\$):

Engine Capacity:

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Front Left Side:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable):

CONDITION OF TYRES Front Tyre Size:

195/65R15 Giti 8 mm

Rear Tyre Size: Rear Left Side:

195/65R15 Giti 8 mm

Giti 8 mm Rear Right Side:

Giti 8 mm Front Right Side: The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	13,389.63	8,233.58	5,156.05	38.51
Miscellaneous Items	0.00	0.00	0.00	
Labour	12,830.00	2,700.00	10,130.00	78.96
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	26,219.63	10,933.58	15,286.05	58.30
Approved Total (Overridden) (S\$)		8,600.00		
(S\$)	26,219.63	8,600.00	17,619.63	67.20
+ GST 7.00/7.00% (S\$)	1,835.37	602.00	1,233.37	67.20
Nett Amount (S\$)	28,055.00	9,202.00	18,853.00	67.20

INSPECTION

Date of Assignment:

07/03/2018

Date Inspected:

06/03/2018 Inspected At:

Trans-cab Auto Services Pte Ltd (Ang

Mo Kio)

2, Ang Mo Kio Street 63 Singapore 569111

Estimated Period of Repair:

8.0 days

Manager: VERON CHEN Adjuster: KENNETH KONG

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: 12 Mar 2018)

CHEVROLET EPICA 2.0 (A) (Catalogue:Merimen Singapore 1.0) 143 Parts:

(Price-denominated Standard List) Labour: Repairer's

Print Code: (Unsubmitted, no print-code for SHB7989X)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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 *.

1 1 2 1 3 1 4 1 5 1 6 1 7 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ty Part No. Particulars	Condition	Repairer's	Amount
2 1 3 1 4 1 5 1 6 1 7 1 8 1 9 1 10 1 11 1 12 1 13 1 14 1 15 1 16 1 17 1 18 1 19 1 20 1 21 1 22 1 23 1 24 1 25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1	*REAR BUMPER	Bent	1,202.00 FL	*1,202.00 FL
3 1 4 1 5 1 6 1 7 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*REAR BUMPER BEAM	Bent	239.94 FL	*239.94 FL
4 1 5 1 6 1 7 1 8 8 1 9 1 1 10 1 1 11 1 1 1 1 1 1 1 1 1 1 1	*REAR BUMPER CENTRE ABSORBER	Cracked	260.00 FL	*260.00 FL
5 1 6 1 7 1 8 1 9 1 10 1 11 1 11 1 11 1 11 1 11 1 11	*REAR BUMPER SIDE RETAINER RH	Cracked	68.76 FL	*68.76 FL
6 1 7 1 8 1 9 1 1 10 1 1 11 1 1 1 1 1 1 1 1 1 1 1	*REAR BUMPER SIDE RETAINER LH	Serviceable	68.76 FL	*-FL
7 1 8 1 9 1 100 1 111 1 1 112 1 1 113 1 1 114 1 1 115 1 1 116 1 1 117 1 1 18 1 1 19 1 1 120 1 1 122 1 1 122 1 1 122 1 1 122 1 1 122 1 1 123 1 1 124 1 1 125 1 1 126 1 1 1 127 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*REAR BUMPER REFLECTORS RH	Bent	119.74 FL	*119.74 FL
8 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*REAR BUMPER REFLECTORS LH	Serviceable	119.74 FL	*-FL
9 1 10 1 11 1 12 1 13 1 14 1 15 1 16 1 17 1 18 1 19 1 20 1 21 1 22 1 23 1 24 1 25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1	*REAR BUMPER TOW HOOK COVER	Serviceable	93.00 FL	*-FL
10	*REAR LUGGAGE FLOOR PANEL	Repair	973.00 FL	*- FL
11	*REAR LUGGAGE FLOOR PANEL INSULATOR	Not Necessary	63.50 FL	*-FL
12	*REAR LUGGAGE FLOOR PANEL TRIM BOARD	Serviceable	378.00 FL	*-FL
13	[1] [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 12 [1] 14 [1] 14 [1] 15 [1]	Bent	623.76 FL	*623.76 FL
14	*REAR END PANEL INNER TRIM	Distorted	263.84 FL	*263.84 FL
15		Bent	973.00 FL	*973.00 FL
16		Cracked	400.00 FL	*400.00 FL
17		Dented	466.56 FL	*466.56 FL
18		Necessary	120.62 FL	*120.62 FL
19	시 그 그는 그는 그는 그는 그 그 그 그 그 그 그 그 그 그 그 그	Necessary	138.84 FL	*138.84 FL
20 1 21 1 22 1 23 1 24 1 25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Necessary	119.84 FL	*119.84 FL
21		Cracked	217.97 FL	
22	The Court of the C	Cracked	128.40 FL	*128.40 FL
23	A	Cracked	128.40 FL	
24 1 25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Repair	120.00 FL	
25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1	1	Repair	120.00 FL	*- FL
26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Broken	479.30 FL	*479.30 FL
27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Bent	359.00 FL	*359.00 FL
28		Cut	479.30 FL	*479.30 FL
29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Repair	359.00 FL	
30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1	THE PARTY OF THE P	Repair	1,110.00 FL	
31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1		Buckled		*1,145.00 FL
32 1 33 1 34 1 35 1 36 1 37 1 38 1		Cracked	418.44 FL	
33 1 34 1 35 1 36 1 37 1 38 1		Repair	1,145.00 FL	
34 1 35 1 36 1 37 1 38 1		Serviceable	418.44 FL	
35 1 36 1 37 1 38 1	ACCES ACCES OF A TEMPTIME DEP	Serviceable	60.00 FS	*-FS
36 1 37 1 38 1	THE PARTY OF THE PARTY OF THE	Necessary	40.00 FS	
37 1 38 1	THE PERSON NAMED IN THE PERSON	Dented	300.00 FS	
38 1	*SET REAR BUMPER FASTENER CLIP	Necessary	44.00 FS	
	*SET REAR FENDER INNER TRIM CLIP LH	Not Necessary		
	*SET REAR FENDER INNER TRIM CLIP RH	Necessary	30.00 FS	
39 1		Not Necessary		(A) ************************************
40 1	*SET REAR BUMPER END DUST COVER CLIP	Necessary	30.00 FS	
41 1	*REAR BOOT STICKER TRANS-CAB	Necessary	30.00 FS	
42 1		Serviceable	10.00 FS	
43 1 44 2	*REAR EXHAUST MOUNTING *REAR WINDSCREEN SEALANT	Necessary	80.00 FS	맛이 아이네트 저는 말했다.

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
45	1		*REAR WINDSCREEN INER SPONGE SEAL	Necessary	100.00 FS	*30.00 FS
46	1		*SPARE TYRE	Serviceable	180.00 FS	*-FS
47	1		*SPARE WHEEL RIM	Serviceable	126.74 FS	*-FS
48	1		*BOOT LID WEATHERSTRIP (50%)	Cut	309.86 FS	*172.14 FS
100	anchise	part. S=Spch	Nett. L=ListItemDisc.			
				Sub Total (S\$)	14,721.75	9,068.85
			- List Item Discount on L Items	10.00/10.00% (S\$)	1,332.12	835.27
				Total Parts (S\$)	13,389.63	8,233.58
			Report was unsubmitted during th	is print-out.		

Recommended Miscellaneous Items There are no new miscellaneous items selected.

December	hobac	Labour
Recomm	iended	Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labo	ur Items			
1	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME	New	5,400.00	1,200.00
2	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	20.00
3	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	90.00
4	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	5,350.00	1,000.00
5	TO REINSTALL REAR BUMPER PARKING SENSOR	New	170.00	60.00
6	TO TRANSFER OF LUGGAGE FLOOR PANEL FITTINGS AND CONDUCT WATER SEEPAGE TEST }	New	170.00	100.00
7	TO TRANSFER OF END PANEL FITTINGS AND CONDUCT WATER SEEPAGE TEST }	New	170.00	1.000.000.000
8	TO REMOVE AND REFIT REAR W/SCREEN GLASS TO FACILITATE BODYWORK REPAIR	New	170.00	120.00
9	TO TRANSFER OF BOOT FITTINGS AND CONDUCT WATER SEEPAGE TEST	New	170.00	60.00
10	TOWING FEES	New	120.00	50.00
11	TO TRANSFER OF FENDER FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST	New	170.00	32
12	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH,FITTINGS AND OTHER,TO ENABLE REPAIR	New	380.00	-
13	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	
	Gross Labou	r Cost (S\$)	12,830.00	2,700.00

< END OF ESTIMATES >