22/03/2002

ASS. REC. BY: | REF: CS/UM1800 4773 / Kiton2 | Special Instruction:

Surveyor: Kenneth **ASSIGNMENT (Office)**

From (Person): Felis of UOL Date/Time: 13032018

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKE 5972E Insured: SCL 2223L

at Workshop m/s Song Kin Tel: 6453 6238

of Blk 1 Sin Ming #01-131

Policy No: DHOM1101606118OO Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 13.03.2018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP' 14.03.2018 H.O.D. Endorsement:

Date/Time: 13032018 5.31pm Person Contacted: Ms. Lee Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKE 5972E - X
	SCL 2223L - NA/UML1300540A/el DOA: 13/3/18
	$9604.60 email
18/4	$9865.60 Confirmed Miss Lee (Diff $533.50, 3.4%)
	no comp sum.

✓ 9/4

UOI

ASSIGNMENT

From: Date: 14/3/18

Estimated Cost:

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

To inspect vehicle No: SKE 5972E

at Workshop m/s: Seng Kin

of: Blk 1 Sin Ming #01-131

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 Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 08 days Res: Yes or No

Lum Sum: 1-B/ 3 Val: Yes or No

CA / REV / REP. / 24 HRS (wp)

Vehicle: IN / OUT

Date: Person Contacted:

Vehicle: SKE 5972E Reg: 03 12

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

Make: MB C180 (A) Komp 1597

Colour: M. Grey A/C Insured: Std / N / NA

Sp Reading: 78680 / Radio Insured: Std / N / NA

Eng No:

C No: WDD 2040452A 686722

Gen Cond: Good / Fair / Poor / Burnt

Steering: Intact / Jammed / Leaked / Burnt or

Brake: Intact / Jammed / Leaked / Burnt or

Mod: Nil / S.Rim / STD A/Rim or

Tyre Size: F: 225/45R17

R: —

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

Front: Rear:

R.Bal: 5 -- R.Bal: 5 --

L.Bal: 5 -- L.Bal: 5 --

DOA: 13/3/18 DI: 14/3/18

Survey held at:

Des 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
15/3	File pass to Catherine, got injury

RECEIVED 20 APR 2018

Date/Time File Pass to: 20/4 [illegible]

Prell. Report

Final Report

Date/Time File Return to:

Days Of Repair: 8

Resurvey No. of Trip: 1

Survey Fee: 170+60 (4x15= 60)

Transportation: 50

50

26

Total: 356

Add Fee: Site inspect $

[illegible] $

[illegible]

[illegible]

Report Format: TP

Lump Sum (B): 9865.60

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

UNITED OVERSEAS INSURANCE LTD

Ref : CS/UOI18004773/Kqb

3 ANSON ROAD #28-01
SPRINGLEAF TOWER SINGAPORE 079909

Date : 13-03-2018

Code : UOI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SCL 2223L	Veh. Inspected	SKE 5972E
	Policy No.	DHOM110160611800	Coverage ($)	0.00
	Claim No.		Excess ($)	0.00
	Assign From	FELIS	Assign Date	13/03/2018

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	13/03/2018	Inspection Date	14/03/2018
	Survey held at	SENG KIN MOTOR WORKS BLOCK 1, SIN MING INDUSTRIAL ESTATE #01-131 SINGAPORE 575636		

5a. Remarks

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

UOI
MEMBER OF THE UOB GROUP

United Overseas Insurance Limited
3 Anson Road #28-01 Springleaf Tower
Singapore 079909
Tel (65) 6222 7733
Fax (65) 6327 3869 / 6327 3870
Email: ContactUs@uoi.com.sg
uoi.com.sg
Co. Reg. No. 197100152R

To :	Seng Kin Motor Works Attn: Ms Lee	Fax : 64580453
From :	Jenny Lew	Fax : 63273869
Date :	13.03.2018	Our ref: SCL2223L (DHOM110160611800) Yr ref : SKE5972E

FACSIMILE MESSAGE

WITHOUT PREJUDICE

REQUEST FOR PRE-REPAIR SURVEY – SKE5972E
ACCIDENT INVOLVING SCL2223L AND SKE5972E ON 13.03.2018

We refer to your letter dated 13.3.2018 received by us through facsimile.

Pursuant to the amended Pre-action Protocol for Non-Injury Motor Accident (NIMA), we enclose a list of our Surveyors, for your attention.

In this case you have proposed to appoint M/s LKK Auto Consultants Pte Ltd to conduct the pre-repair survey on without prejudice basis.

Please forward us a copy of the estimated cost of repair.

Please seek your client's instruction for the repair after the inspection has been completed.

We reserve all our rights in this matter.

Thank you.

Regards

Jenny Lew
Claims Dept

cc. LKK Auto Consultants Pte Ltd
Fax: 62564315
Attn : Catherine

For your immediate attention.

M9UB1603460B / Su Brothers' Motor Workshop - AMK
ENTRY DATE & TIME: 13/03/2018 13:41
SUBMITTED BY: Koh Siow Ling

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	13/03/2018 13:41
Date Of Accident	13/03/2018 07:45
Exact Location Of Accident	T-JUNCTION OF JLN BINCHANG & BINCHANG WALK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKE5972E
Insured/Policyholder	
Name Of Registered Owner	WEE CHENG CHON
NRIC No	S1263587G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90092322
Alternative Phone No	OTHERS-90092322
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180KOM
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D17MTPV01003610
Cover Note Number	
Driver	
Name of Driver	WEE CHENG CHON
NRIC No	S1263587G
Date Of Birth	16/10/1957
Occupation	INDOOR
Date Of Driving Pass	27/07/1976
Driving Experience	41 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90092322
Fax Number	

Address	5 PEMIMPIN DR 17-03
Postcode	576149
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	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?	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: : TAY MOY HIANG GENDER: : FEMALE

Details of Police Action

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

Circumstances of Accident

ON 13/03/2018 @ ABOUT 0745HRS, I WAS TRAVELLING ALONG JLN BINCHANG. I STOPPED AT THE JUNCTION OF BINCHANG WALK GOING TO TURN RIGHT. WHILE WAITING FOR THE OPPOSITE TRAFFIC TO CLEAR, SUDDENLY I FELT AN IMPACT FROM THE REAR OF MY VEHICLE. I GOT OUT OF MY VEHICLE AND REALISED THAT VEHICLE B (SCL 2223 L) HAD COLLIDED INTO MY VEHICLE REAR PORTION. PASSENGER : MDM TAY MOY HIANG

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	SCL2223L
Vehicle Make/Model/Colour	VOLKSWAGON
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ESTER LIM
NRIC/Passport Number	S1227135B
Contact Number	91169868
Address	

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report only 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.

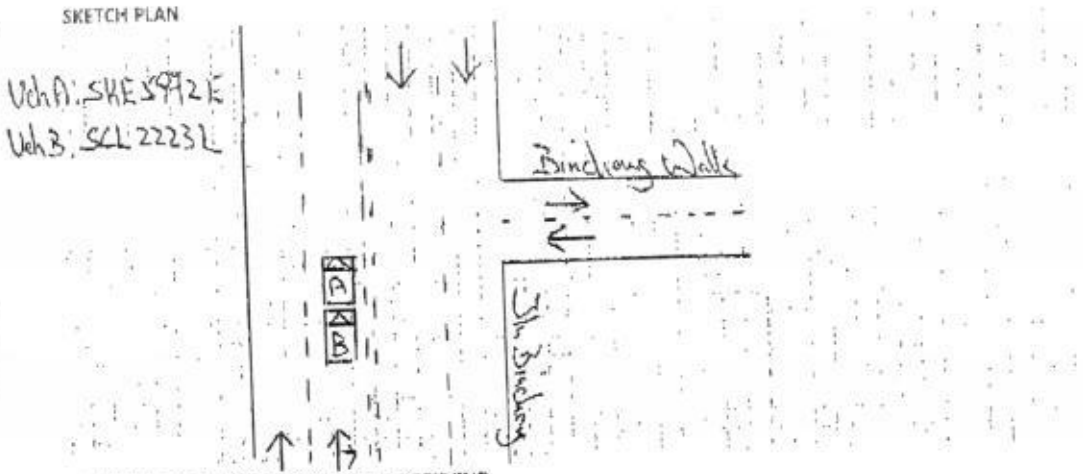
Policyholder's Signature
Date & Time:

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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/3/2018 @ about 07xxhrs, I was travelling along Jln Bindang. I stopped at the junction of Bindang Walk going to turn right. While waiting for the opposite traffic to clear, suddenly I felt an impact from the rear of my vehicle. I got out of my vehicle and realised that veh B ~~(SKE~~ (SCL2223L) had collided into my vehicle rear portion.

Passenger : Mdm Tay May Hiang

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.:

SINGAPORE
POLICE FORCE

T20180313/2114

1 of 4

Report No: T20180313/2114

Police Station Of Origin
Bishan N.P.C.
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made	Vide Report No	Station Diary No
13/03/2018 15:55		74

Informant's Particulars

Name of Informant WEE CHENG CHON			Address 5 PEMIMPIN DRIVE #17-03 SINGAPORE 576149	
ID Type / ID No NRIC NO / S1263587G			Contact No Home/Office	Mobile 90092322
Nationality SINGAPORE CITIZEN			Email	
Sex Male	Age 60	Date of Birth 16/10/1957	Type of Informant Driver	
Race Chinese			Language English	Institution / School Name
Occupation ADMINISTRATOR			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 13/03/2018 07:45	Type of Location T-Junction
Location Junction of Road 1 and Road 2 JALAN BINCHANG BINCHANG WALK				
Weather Clear		Road Surface Dry		Road Speed Limit
Traffic Flow		Traffic Control		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
SCL2223L	Car	VOLKSWAGON		Black		0
SKE5972E	Car	MERCEDES BENZ	C 180 KOMPRESSOR	Silver	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKE5972E	TENET SOMPO INSURANCE PTE LTD.	D17MTPV01003610	19/03/2017	18/03/2018

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 / Sgt 2 REEMA KAUR SANDHU	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/03/2018 15:55
Officer In Charge Of Case: TP / AEIT / SSI KASMAWATI BTE SAMIAN SN 061 Contact No.: 65476179	Classification Of Case:
Authentication Stamp NP158 SIGNATURE	

POLICE FORCE

Report No T/20180313/2114

Police Station Of Origin
Bishan N P C
20 Bishan Street 23 SINGAPORE 579757
Tel No 1800-5529999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured NIL			
Passenger			
Name	TAY MOY HIANG	ID No.	S1506360B
Related Vehicle	SKE5972E (Car)	Contact No	98741262
Hospital/Clinic	HORIZON MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	13/03/2018	Date Discharge	13/03/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	WEE CHENG CHON	ID No.	S1263587G
Related Vehicle	SKE5972E (Car)	Contact No.	90092322
Hospital/Clinic	HORIZON MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	13/03/2018	Date Discharge	13/03/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	ESTER LIM	ID No.	S1227135B
Related Vehicle	NIL	Contact No.	91169868
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 13.03.2018 at about 0745hrs, I was driving my car (SKE5972E) along Jln Binchang. I then stopped at the junction of Binchang Walk as I wanted to turn right. While waiting for the on-coming vehicles from the opposite direction to clear, suddenly I felt a strong impact from the rear of my vehicle. I exited from my car to make a check and discovered another car (SCL2223L) had collided with my car from the rear. Both cars resulted in serious damages. I wish to state that while I was waiting, I had observed the said car from my rear view mirror driving straight ahead without slowing down.

My wife was the only passenger in my car and both of us sustained slight injuries and received 5 days of

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

CONTINUATION OF REPORT

MC each.

I have an in-car camera but I have not checked the footage. No police or ambulance was at scene.

成金摩哆
Seng Kin Motor Works
Block 1, Sin Ming Industrial Estate
#01-131 Singapore 575636.
TEL: 64536238, 64532961 FAX: 64580453
B. Reg. No. 111182/OOW

WEE CHENG CHON
5 PEMIMPIN DRIVE #17-03S
SINGAPORE 576149

Not Authorised
Resurvey B4 paint
8 days
@ 9865.60

Attention : Motor Claim Department
Contact : 90092322

Estimate : ES000084

Date : 13/03/2018
Vehicle Num. : SKE 5972E
Make/Model : MERCEDES BENZ C180
Chassis/Eng# : WDD2040452A686722
Accident Date : 13/03/2018
Claim No. :
Reference : TP/SK/UOI/2018/004
Policy No. : D17MTPV01003610

S/N	Quantity	Particular	Unit Price	Amount S$
		NETT ITEMS :		
1.	1 PCE	REAR BOOT COVER		1,700.00
2.	1 PCE	REAR BOOT COVER EMBLEM - KOMPRESSOR		110.00
3.	1 PCE	REAR BOOT COVER EMBLEM - LOGO		50.00
4.	1 PCE	REAR BOOT COVER EMBLEM - C180		86.00
5.	1 PCE	REAR BOOT COVER CHROME MOULDING		210.00
6.	2 PCS	REAR O/S & N/S BOOT HINGES	170.00	340.00
7.	1 PCE	REAR BOOT UPPER LOCK		306.00
8.	1 PCE	REAR TAILLAMP END PANEL		1,300.00
9.	1 PCE	REAR TAIL LAMP PANEL INNER TRIM		125.00
10.	2 PCS	REAR O/S & N/S TAIL LAMP ASSY N/S O/S	720.00	1,440.00
11.	2 PCS	REAR O/S & N/S TAILLAMP LOWER BRACKETS	72.00	144.00
12.	1 PCE	REAR BUMPER		1,440.00
13.	2 PCS	REAR O/S & N/S BUMPER MOULDING	140.00	280.00
14.	1 PCE	REAR BUMPER CENTRE MOULDING		197.00
15.	1 PCE	REAR BUMPER TOW HOOK COVER		47.00
16.	1 PCE	REAR BUMPER REINFORCEMENT		710.00
17.	2 PCS	REAR O/S & N/S BUMPER SIDE RETAINER	38.00	76.00
18.	2 PCS	REAR O/S & N/S BUMPER BRACKETS	24.00	48.00
19.	1 PCE	REAR EXHAUST CHROME PIPE		220.00
20.	1 PCE	REAR EXHAUST BOX		1,775.00
21.	1 PCE	REAR SPARE TYRE BOARD		290.00
22.	2 PCS	REAR SPARE TYRE CLOSING WALL PANEL	420.00	840.00
23.	1 PCE	REAR SPARE TYRE WELL PLASTIC		65.00
		Nett Total S$:		11,799.00
		10.00% Discount S$:		1,179.90
				10,619.10

CONTINUE / ...

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:

成金摩哆
Seng Kin Motor Works
Block 1, Sin Ming Industrial Estate
#01-131 Singapore 575636.
TEL: 64536238, 64532961 FAX: 64580453
B. Reg. No. 111182/OOW

WEE CHENG CHON
5 PEMIMPIN DRIVE #17-03S
SINGAPORE 576149

Attention : Motor Claim Department

Contact : 90092322

Estimate : ES000084

Date : 13/03/2018
Vehicle Num. : SKE 5972E
Make/Model : MERCEDES BENZ C180
Chassis/Eng# : WDD2040452A686722
Accident Date : 13/03/2018
Claim No. :
Reference : TP/SK/UOI/2018/004
Policy No. : D17MTPV01003610

S/N	Quantity	Particular	Unit Price	Amount S$
1.	2 SETS	SPECIAL NETT ITEMS : REAR BUMPER SENSOR	Daysho 280.00	560.00 ✓
		Special Nett Total S$:		560.00
		LABOUR : LABOUR CHARGES TO CHANGE EXHAUST PIPE	~~	250.00 ✗
		LABOUR CHARGES TO REMOVE REAR CUSHION SEATS, TO FACILITATE REPAIR AND REFIX SAME.		220.00 120
		LABOUR TO REMOVE & REFIT BODY DAMAGED PARTS, CUT,WELD , PANEL BEAT, STRAIGHTEN & REALIGN FRT. AFFECTED PARTS.		1,200.00 1000
		LABOUR TO COMPRESS & RESET FRT RH & LH SEAT HEAD REST		350.00 200
		TO PUTTY AND SPRAY PAINTING		1,500.00 1000
		TO CHECK WIRING AND RECONNECT REAR BUMPER SENSORS		200.00 80
		TO SPRAY UNDERSEAL		100.00 80
		Labour Total S$:		3,820.00

E. & O.E.

Total S$: 14,999.10

for Seng Kin Motor Works

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

UNITED OVERSEAS INSURANCE LTD

Ref : CS/UOI18004773/Kqbn2

3 ANSON ROAD #28-01
SPRINGLEAF TOWER SINGAPORE 079909

Date : 24-04-2018

Code : UOI2

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	SCL 2223L	Veh. Inspected	SKE 5972E
	Policy No.	DHOM110160611800	Coverage ($)	0.00
	Claim No.		Excess ($)	0.00
	Assign From	FELIS	Assign Date	13/03/2018

2. Vehicle Particulars & Condition

	Make & Model	MERCEDES C180 KOMP (A)	c.c	1597
	Engine No.	HIDDEN	Year of Reg.	2012
	Chassis No.	WDD2040452A686722	Colour	METALLIC GREY
	Odometer	78680	Steering	IN ORDER
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
	General	GOOD		

3. Conditions of Tyres

		Size	Make	Balance
	R/H Front Tyre	225/45 R17	CONTINENTAL	5 mm
	L/H Front Tyre	225/45 R17	CONTINENTAL	5 mm
	R/H Rear Tyre	225/45 R17	CONTINENTAL	5 mm
	L/H Rear Tyre	225/45 R17	CONTINENTAL	5 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	13/03/2018	Inspection Date	14/03/2018
	Survey held at	SENG KIN MOTOR WORKS BLOCK 1, SIN MING INDUSTRIAL ESTATE #01-131 SINGAPORE 575636		

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: **8 Working Days**

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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKE 5972E

Qty	Description of Parts	Condition	Estimate By Workshop ($)	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR BOOT COVER (N)	BUCKLED	1,700.00	1,700.00
1	REAR BOOT COVER EMBLEM-KOMPRESSOR (N)	NECESSARY	110.00	110.00
1	REAR BOOT COVER EMBLEM-LOGO (N)	NECESSARY	50.00	50.00
1	REAR BOOT COVER EMBLEM-C180 (N)	NECESSARY	86.00	86.00
1	REAR BOOT COVER CHROME MOULDING (N)	SERVICEABLE	210.00	-
2	REAR O/S & N/S BOOT HINGES @$170.00 (N)	DENTED	340.00	340.00
1	REAR BOOT UPPER LOCK (N)	TO REPAIR SEE LABOUR	306.00	-
1	REAR TAILLAMP END PANEL (N)	BENT	1,300.00	1,300.00
1	REAR TAIL LAMP PANEL INNER TRIM (N)	DISTORTED	125.00	125.00
2	REAR O/S & N/S TAIL LAMP ASSY @$720.00 (N)	O/S CRACKED / N/S SERVICEABLE	1,440.00	720.00
2	REAR O/S & N/S TAILLAMP LOWER BRACKETS @$72.00 (N)	SERVICEABLE	144.00	-
1	REAR BUMPER (N)	BUCKLED	1,440.00	1,440.00
2	REAR O/S & N/S BUMPER MOULDING @$140.00 (N)	NECESSARY	280.00	280.00
1	REAR BUMPER CENTRE MOULDING (N)	NECESSARY	197.00	197.00
1	REAR BUMPER TOW HOOK COVER (N)	DENTED	47.00	47.00
1	REAR BUMPER REINFORCEMENT (N)	BENT	710.00	710.00
2	REAR O/S & N/S BUMPER SIDE RETAINER @$38.00 (N)	DISTORTED	76.00	76.00
2	REAR O/S & N/S BUMPER BRACKETS @$24.00 (N)	CRACKED	48.00	48.00
1	REAR EXHAUST CHROME PIPE (N)	SERVICEABLE	220.00	-
1	REAR EXHAUST BOX (N)	TO REPAIR SEE LABOUR	1,775.00	-
1	REAR SPARE TYRE BOARD (N)	CRACKED	290.00	290.00
2	REAR SPARE TYRE CLOSING WALL PANEL @$420.00 (N)	SERVICEABLE	840.00	-
1	REAR SPARE TYRE WELL PLASTIC (N)	CRACKED	65.00	65.00
	LESS 10% DISCOUNT		-1,179.90	-758.40
			10,619.10	6,825.60
	SPECIAL NETT ITEMS			
2	SETS REAR BUMPER SENSOR @$280.00 (SN)	DENTED / SHORTED	560.00	560.00
			560.00	560.00
	LABOUR			
	LABOUR CHARGES TO CHANGE EXHAUST PIPE.	NOT NECESSARY	250.00	-

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

Qty	Description of Parts	Condition	Estimate By Workshop ($)	Our Adjusted ($)
	LABOUR CHARGES TO REMOVE REAR CUSHION SEATS,TO FACILITATE REPAIR AND REFIX SAME.		220.00	120.00
	LABOUR TO REMOVE & REFIT BODY DAMAGED PARTS,CUT,WELD,PANEL BEAT,STRAIGHTEN & REALIGN FRT AFFECTED PARTS.INCLUSIVE OF THE REPAIR OF REAR BOOT UPPER LOCK AND REAR EXHAUST BOX.		1,200.00	1,000.00
	LABOUR TO COMPRESS & RESET FRT RH & LH SEAT HEAD REST.		350.00	200.00
	TO PUTTY AND SPRAY PAINTING.		1,500.00	1,000.00
	TO CHECK WIRING AND RECONNECT REAR BUMPER SENSORS.		200.00	80.00
	TO SPRAY UNDERSEAL.		100.00	80.00
			3,820.00	2,480.00
	GRAND TOTAL		**14,999.10**	**9,865.60**
	RECOMMENDED COST OF REPAIRS			**9,865.60**

Report Ref No. CS/UOI18004773/Kqbn2

KONG SENG CHEONG

Licensed Appraiser