

Surveyor

ASSIGNMENT (Office)

From (Person): Lee Fong Hew of AWAC Date/Time: 21/3/18 01:35pm

Estimated Cost: Bill to:

① T / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: XD 52671 Insured:

at Workshop m/s Public Trailer Equipment Supplies Tel: 6863 1728

of 28 Jalan Buroh

Policy No: BYFCSB0007171710 Claim No: NSV1800145 / SG

Sum Insured: Excess: \$2,500.00

Make of Veh: D.O.A. 02/03/2018

(Client's Record) 28 Jalan Buroh Afternoon 023/3/18

CA / REV / REP. / REV 24 HRS /wp/ H.O.D. Endorsement:

Date/Time: 11:06am @ 22/3/18 Person Contacted: Steven Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	XD 52671 - NA/EQI17007804/r3 D.O.A: 19/4/17
	PIC: wei poon @ 8383 5590
	Wei poon-kho @ dir.qind.com
	Case on hold; owner want claim TP
17/5/18	Speak to stella, TP claim against liberty. We did not survey the vehicle.
(10.10am)	We will submit patch report.

Signature

Tan Jui

REF: AWAC

ASSIGNMENT

From: Date: 23/3/18

Estimated Cost:

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

To inspect Vehicle No: XD 5267J
at Workshop m/s Public Trailer Equipment Supplies
of 25 Jalan Buroh

Insured:

Policy No.

Claims No.

Sum Insured: Excess: \$2,500.00

(Client's Record)

Afternoon

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

Vehicle: IN / OUT

Date: Person Contacted:

Date / Time Action / Instruction

Submit prel. report

Veh No: XD5267J

Yr Regn:

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

☒ Truck / Trailer or

Make: Scania P380

C.C.

Colour: Blue

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: XLEP8X40005271999

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 275/80R22.5

R: 7 - (7)

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

TOYO / YOKO or

Front

Rear

R/Bal: 8 mm

R/Bal: 8/8 mm

L/Bal: 8 mm

L/Bal: 8/8 mm

D.O.A.

D.O.I: 25/5/18 @ 330 pm

Survey held at PTES

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

Rear b/s

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

RECEIVED 17 MAY 2018

Date/Time File Pass to?

☒ : Preli. Report

Days Of Repair:

1) typed

☐ : Final Report

Resurvey No. of Trip:

Date/Time File Return to?

Survey Fee:

2)

Add Fee: ☐ Site Insp \$

Transportation

☐ Interview \$

1 S - RS \$

☐ Tech. Insp \$

Photos

☐ Weekend \$

Other

Report Format:

Lump Sum / I.B.I: \$

TOTAL

200
200



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				
ALLIED WORLD ASSURANCE COMPANY LTD		Ref : CS/AWA18005388/T1rd3		
(SINGAPORE BRANCH) 60 ANSON ROAD #08-01 (8th FLOOR) MAPLETREE ANSON SINGAPORE 079914		Date : 22-03-2018		
		Code : AWA		
1. Policy Particulars :- OWN DAMAGE				
Insured Veh.		Veh. Inspected	XD 5267X	
Policy No.	BVFCB0007171710	Coverage (\$)	0.00	
Claim No.	NSV1800145/SG	Excess (\$)	2,500.00	
Assign From	LEE FONG HEW	Assign Date	22/03/2018	
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	02/03/2018	Inspection Date		
Survey held at	PUBLIC TRAILER EQUIPMENT SUPPLIES P/L ANNEX 5A JALAN BURUH			
5a. Remarks				
A)THE MARKET VALUE IS S\$------(EST. AVERAGE) B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.				

Catherine Chong (LKK Auto)

From: Hew, LeeFong <LeeFong.Hew@awac.com> on behalf of Motorsurvey <Motorsurvey@awac.com>
Sent: Wednesday, 21 March, 2018 1:35 PM
To: 'assignments@lkkauto.com'
Cc: 'sur@lkkauto.com'
Subject: OD survey assignment for XD 5267J - DOA : 02.03.2018 Our Ref: NSV1800145/SG

The above captioned accident refers. Please conduct an "OWN DAMAGE" survey on the following:

Insured Vehicle	:	XD 5267 J		
Policy Number	:	BVFCB0007171710	Account Code:	B800SD0
Policy Excess	:	\$ 2,500.00		
Voluntary Excess	:	NA		
Sum Insured	:	Market Value with COE & PARF		
Make / Model	:	SCANIA P380LB8X4MSA TANKER TRUCK / 2011		
Name of Workshop	:	Public Trailer Equipment Supplies Pte Ltd		
Contact Number	:	6863 1728		
Person to Contact	:	Mr Steven		
Estimated Cost of repairs	:	\$ 6,874.75		
(x)	Please take photographs of the front windscreen area from inside to ascertain whether the insured vehicle is equipped with a car camera. (Compulsory)			
(x)	Please request insured to submit addendum to change for Own Damage claim			
(x)	Please request driver's work pass and driving license			
(x)	Please revert with your preliminary survey report with photographs			
Remarks				

Regards,

Claims Division

The information contained in this e-mail and any attachments hereto is confidential. If you are not the intended recipient, you must not use or disseminate any of this information. If you have received this e-mail

in error, please immediately notify the sender by reply e-mail and permanently delete the original e-mail (and any attachments hereto) and any copies or printouts thereof. Although this e-mail and any attachments hereto are believed to be free of any virus or other defect that might affect any computer system into which it is received and opened, it is the responsibility of the recipient to ensure that it is virus free and no responsibility is accepted by Allied World Assurance Company Holdings, GmbH or its subsidiaries or affiliates, either jointly or severally, for any loss or damage arising in any way from its use.

Janice Lee (LKKAUTO)

From: Goh, Stella <stella.goh@awac.com>
Sent: Wednesday, March 28, 2018 1:28 PM
To: KHOO, Wei boon
Cc: SUR; Evelyn Lim; Chan, Peggy
Subject: RE: GIA report XD5267J

Our Claim ref: NSV1800145

Dear Wei Boon,

Thank you for the update.

Regards
Stella Goh
Claims Analyst
Claims Group
Global Markets

Allied World Assurance Company, Ltd
60 Anson Road #08-01 Mapletree Anson Singapore 079914
T: +65 6423 0857
F: +65 6423 0864
E: stella.goh@awac.com
W: www.awac.com

From: KHOO, Wei boon <weiboon.khoo@airliquide.com>
Sent: Tuesday, 27 March 2018 3:03 PM
To: Goh, Stella <stella.goh@awac.com>
Cc: sur@lkkauto.com; Evelyn Lim <evelyn.lim@aon.com>; Chan, Peggy <Peggy.Chan@awac.com>
Subject: Re: GIA report XD5267J

Hi Stella,

We had informed Public Trailer Ptd Ltd to claim against third party on the repair cost.

Regards
Wei Boon

On Tue, Mar 27, 2018 at 2:46 PM, Goh, Stella <stella.goh@awac.com> wrote:

Our Claim ref: NSV1800145

Dear Wei Boon,

We refer to our email dated 26.03.2018.

Please do let me know whether XD 5267 J is claiming against third party as we are still holding onto the own damage authorization.

Hope this clarifies.

Thank you.

Regards
Stella Goh
Claims Analyst
Claims Group
Global Markets

Allied World Assurance Company, Ltd
60 Anson Road #08-01 Mapletree Anson Singapore 079914
T: +65 6423 0857
F: +65 6423 0864
E: stella.goh@awac.com
W: www.awac.com

From: Goh, Stella
Sent: Monday, 26 March 2018 2:00 PM
To: 'KHOO, Weiboon' <weiboon.khoo@airliquide.com>; sur@lkkauto.com
Cc: Evelyn Lim <evelyn.lim@aon.com>; Chan, Peggy <Peggy.Chan@awac.com>
Subject: RE: GIA report XD5267J

Our Claim ref: NSV1800145

Dear Wei Boon,

We refer to our earlier tele-conversation.

As mentioned, if XD 5267 J wishes to claim against own damage, there would be an excess of \$ 2,500 applicable.

Your workshop would assist you on this \$ 2,500 excess recovery against the insurer of PC 722 W.

However if you wish to proceed with third party claim, you may get your workshop to advise you.

Hope this clarifies.

Thank you.

Regards
Stella Goh
Claims Analyst
Claims Group
Global Markets

Allied World Assurance Company, Ltd
60 Anson Road #08-01 Mapletree Anson Singapore 079914
T: +65 6423 0857
F: +65 6423 0864
E: stella.goh@awac.com
W: www.awac.com

From: KHOO, Weiboon <weiboon.khoo@airliquide.com>
Sent: Monday, 26 March 2018 11:44 AM
To: sur@lkkauto.com
Cc: Goh, Stella <stella.goh@awac.com>
Subject: GIA report XD5267J

Hi Janic,

Please see attached for the GIA report.

Report indicated Third Party Claim.

--

Best Regards

Khoo Wei Boon (Mr)

Senior Executive Fleet Maintenance



Air Liquide Singapore Main: +65 6268 3788
Private Limited DID: +65 6496 5919
24 Jalan Buroh Fax: +65 6262 1752
Singapore 619480

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--

Best Regards

Khoo Wei Boon (Mr)
Senior Executive Fleet Maintenance



Air Liquide Singapore Main: +65 6268 3788
Private Limited DID: +65 6496 5919
24 Jalan Buroh Fax: +65 6262 1752
Singapore 619480

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	1157D
Vehicle Details	
Vehicle No.:	XD5267J
Vehicle to be Exported:	No
Intended De-registration Date:	26 Mar 2018
Vehicle Make:	SCANIA
Vehicle Model:	P380LB8X4MSA
Primary Colour:	Multi-Colour
Manufacturing Year:	2011
Engine No.:	6681781
Chassis No.:	XLEP8X40005271999
Maximum Power Output:	-
Open Market Value:	\$136,885.00
Original Registration Date:	31 Oct 2011
First Registration Date:	31 Oct 2011
Transfer Count:	0
Actual ARF Paid:	\$6,845.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	30 Oct 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$30,089.00
COE Rebate Amount:	\$10,814.00
Total Rebate Amount:	\$10,814.00

The information contained herein is correct as at 26 Mar 2018

OK

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	02/03/2018 16:41
Date Of Accident	02/03/2018 09:30
Exact Location Of Accident	JURONG PIER ROAD BEFORE CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD5267J
Insured/Policyholder	
Name Of Registered Owner	AIR LIQUIDE SINGAPORE PRIVATE LIMITED
Co Reg No	NA 1970611570
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62668322

Vehicle Particulars

Manufacturer	SCANIA
Model	TANKER
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	BVFCBSB0007171710
Cover Note Number	

Driver

Name of Driver	MADIYALAGAN A/L RETNAM
Passport No/FIN	F7015336W
Date Of Birth	06/11/1969
Occupation	OUTDOOR
Date Of Driving Pass	24/11/1993
Driving Experience	24 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90514069
Fax Number	
Contact Number	OFFICE-62668322
Email Address	NOEMAIL

Address	NO.24 JLN BUROH
Postcode	619480
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

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	PC722W
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIM THANG SENG
NRIC/Passport Number	S1253524D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

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 Insured Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

6. 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' law firms/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/postal packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law firms/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/are be disclosed by any of the insurers and/or GIA to their third party service providers or agents (ARUBA INC SINGAPORE PRIVATE LIMITED) located outside of Singapore, for one or more of the above Purposes.

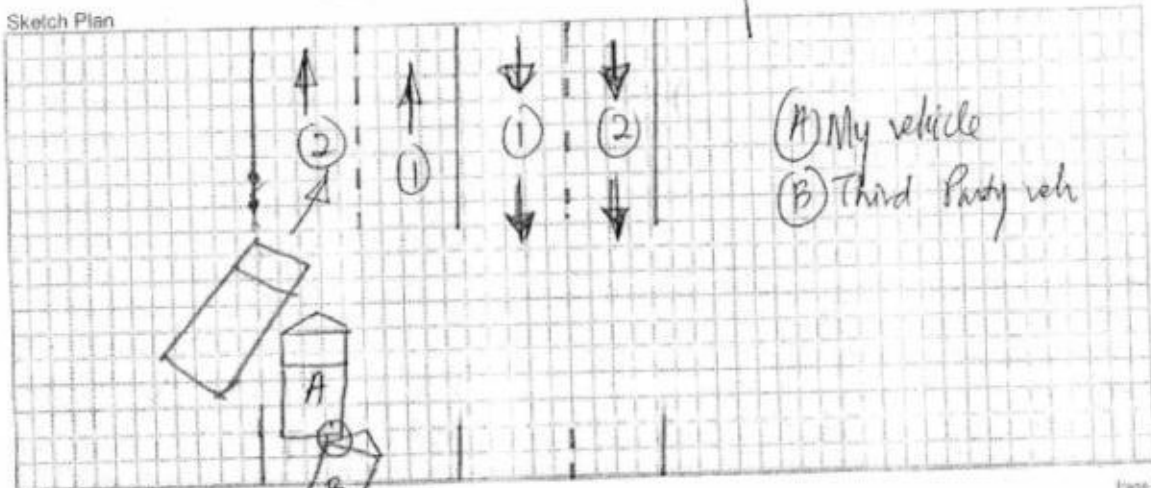
ARUBA INC SINGAPORE PRIVATE LIMITED
438B Alexandra Road
Block B #07-01 Alexandra Technopark
Singapore 119968
At Sy 1.42

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstance of the Accident

Page 4

Accident Sketch Plan

I was going at a slow speed in my lane suddenly a unknown vehicle from the left cut into my lane, I applied my brakes and did not hit only the vehicle, but a vehicle 'B' from the rear hit into my vehicle causing damages at both vehicles

We exchange particulars & no one was hurt.

IMPORTANT NOTE

Under **General Condition – Conduct of Claim** of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information

Declaration

We declare the foregoing particulars are true in every respect.

AIR LIQUIDE SINGAPORE PRIVATE

438B Alexandra Road

Block B #07-01 Alexandra Technopark

Singapore 119968

ALSg 142

Policyholder's Signature : Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

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GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017785

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MSI 51802 9830 Vehicle Registration No : XD 5267 J
Name (as shown in NRIC) : madhulagan 4/L Retn NRIC/FIN/Passport No : F7015336W
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 110-24 JLN Bunk Singapore 619480
Contact (Tel) : 62668322 Mobile No. : 9051 4069
Email Address : -
Date of Accident : 2.3.2018 Time of Accident : 0930 hrs
Place of Accident : Jurong Prier Road Before Checkpoint
Insurance Company : Allied World

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

I want to amend from 'Reporting Only' to claiming 'Third Party'.

05-03-18
Policyholder / Driver's Signature
Date:

5/3/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:



Public Trailer Equipment Supplies Pte Ltd

Workshop: 28 Jalan Buroh Singapore 619484
 Mailing address: Blk 454 Choa Chu Kang Ave 4 #14-117 Singapore 680454
 Tel: +65 6863 1728 / 2298 Fax: +65 6863 1773 Email: publictrailer@gmail.com
 Website: www.publictrailer.com Co. Reg. No.: 199202033N GST Reg. No.: M2-0106311-6

QUOTATION

To	Air Liquide Singapore Pte Ltd	Quotation No.	Q180344
Address	438B Alexandra Road Block B, #07-01 Alexandra Technopark Singapore 119968	Terms	60 days
		Date	21/03/2018
Attn.	Mr. Khoo Wei Boon	Vehicle No.	XD5267J

As per your request, we are pleased to quote as follows:

Description	Quantity	Unit Price	Total
LABEL, TEIP - WITH INSTALLATION	1.00	\$75.00	\$75.00 <i>rel</i>
LABOUR CHARGES - FOR REPAIR REAR CAB RHS PANEL & PILLAR AND REPLACEMENT OF ENTIRE DOOR	1.00	\$1,200.00	\$1,200.00 <i>900</i>
LABOUR FOR INSTALLATION - REMOVE & REFIT OF RHS FLOW METER & ATTACHMENTS TO FACILITATE THE REPAIRING <i>- photo.</i>	1.00	\$380.00	\$380.00 <i>200</i>
LAMP BRACKET - RHS	1.00	\$35.00	\$35.00 <i>Rp</i>
SIGN, ECE CONSPICUITY MARKING, 50X700MM (PC)	1.00	\$5.00	\$5.00 <i>rel</i>
TANK CAB BACK DOOR - RHS - STAINLESS STEEL - CUSTOM MADE	1.00	\$3,650.00	\$3,650.00 <i>bt</i>
TANK CAB SIDE PANEL - RHS	1.00	\$185.00	\$185.00 <i>bt</i>
TANK DOOR REAR HINGE - RHS	2.00	\$105.00	\$210.00 <i>bt</i>
V BUMPER REAR	1.00	\$150.00	\$150.00 <i>bt</i>
V PAINTING RESPRAY, TRUCK CABIN PARTIAL - ON AFFECTED PARTS OF CAB - 3 COL - AL WHITE, BLUE & BLACK	1.00	\$450.00	\$450.00 <i>300</i>
V TAIL LAMP, SCANIA - RHS	1.00	\$85.00	\$85.00 <i>one</i>

Subtotal	\$ 5760 <i>#</i>	\$6,425.00
GST (%)		7%
GST		\$449.75
Grand Total		\$6,874.75

Remarks: WORK DAYS: 2 WEEKS, TANK NO. LN0512

We trust that the above are in order and we look forward to your confirmation and job number/PO.

Thank you and best regards,
STEVEN

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:

E & O E

Taufik 97495749
Ex \$2500 10days
*Not Authorise * Resurvey*
Resurvey before paint
sure take action.

To reply, please endorse & fax back to us.
 Confirmed and accepted by:

Name / Signature and Company Stamp



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

ALLIED WORLD ASSURANCE COMPANY LTD

Ref : CS/AWA18005388/T1rd3e2

(SINGAPORE BRANCH)

60 ANSON ROAD #08-01 (8th FLOOR)

MAPLE TREE ANSON

SINGAPORE 079914

Date : 22-05-2018



Code : AWA

1. Policy Particulars :- OWN DAMAGE

Insured Veh.		Veh. Inspected	XD 5267J
Policy No.	BVFCB0007171710	Coverage (\$)	0.00
Claim No.	NSV1800145/SG	Excess (\$)	2,500.00
Assign From	LEE FONG HEW	Assign Date	21/03/2018

2. Vehicle Particulars & Condition

Make & Model	SCANIA P380LB8X4MSA	c.c	11705
Engine No.	HIDDEN	Year of Reg.	2011
Chassis No.	XLEP8X40005271999	Colour	BLUE
Odometer	-	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	295/80 R22.5	MICHELIN	8 mm
L/H Front Tyre	295/80 R22.5	MICHELIN	8 mm
R/H Rear Tyre	295/80 R22.5 (D)	MICHELIN	8/8 mm
L/H Rear Tyre	295/80 R22.5 (D)	MICHELIN	8/8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	02/03/2018	Inspection Date	23/03/2018
Survey held at	25 JALAN BUROH		
Repairer	PUBLIC TRAILER EQUIPMENT SUPPLIES P/L		

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:	10 Working Days
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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

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. XD 5267J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	LABEL, TEIP - WITH INSTALLATION	NECESSARY	75.00	75.00
1	LAMP BRACKET - RHS	TO REPAIR SEE LABOUR	35.00	-
1	SIGN, ECE CONSPICUITY MARKING, 50X700MM (PC)	NECESSARY	5.00	5.00
1	TANK CAB BACK DOOR - RHS - STAINLESS STEEL - CUSTOM MADE	BENT	3,650.00	3,650.00
1	TANK CAB SIDE PANEL - RHS	BENT	185.00	185.00
2	TANK DOOR REAR HINGE - RHS @\$105.00	BENT	210.00	210.00
1	V BUMPER REAR	BENT	150.00	150.00
1	V TAIL LAMP, SCANIA - RHS	CRACKED	85.00	85.00
			4,395.00	4,360.00
LABOUR				
	LABOUR CHARGES - FOR REPAIR REAR CAB RHS PANEL & PILLAR AND REPLACEMENT OF ENTIRE DOOR. INCLUSIVE OF THE REPAIR OF LAMP BRACKET - RHS.		1,200.00	900.00
	LABOUR FOR INSTALLATION - REMOVE & REFIT OF RHS FLOW METER & ATTACHMENTS TO FACILITATE THE REPAIRING.		380.00	200.00
	V PAINTING RESPRAY, TRUCK CABIN PARTIAL - ON AFFECTED PARTS OF CAB - 3 COL - AL WHITE, BLUE & BLACK.		450.00	300.00
			2,030.00	1,400.00
GRAND TOTAL			6,425.00	5,760.00
RECOMMENDED COST OF LUMP SUM REPAIRS				5,760.00
LESS EXCESS				-2,500.00
NETT LIABILITY				3,260.00

Report Ref No. CS/AWA18005388/T1rd3e2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

Licensed Appraiser

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