

ASS. REC. BY:

REF: CS/CTI18005580/Dvd3 Special Instruction:

Surveyor: Bryen Menner

ASSIGNMENT (Office)

From (Person): Jowyn Tay

of CTI

Date/Time: 23/3/18 @ 1:44pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLA 9069X

Insured: YL 7423H

at Workshop m/s: Teamwork Garage

Tel: 6844 2475

of 53 Ubi Ave | #01-24

Policy No: DMCVSN1646621701

Claim No: SNMI8D01532C02

Sum Insured:

Excess:

Make of Veh:  
(Client's Record)

D.O.A. 19/03/2018

CA / REV / REP. / REV 24 HRS Wp'

H.O.D. Endorsement:

Date/Time: 11:42am @ 26/3/18

Person Contacted: Darren

Vehicle  IN  OUT

Date/Time	Action/Instruction (✓) Estimate	
	SLA 9069X - NA   TMI18005222/24	D.O.A - 19/3/18
	YL 7423H - NA   TMI18005222/24	D.O.A 19/3/18

05/11/14

REF:

Assignment

ASSIGNMENT

1/3/2009

2009 Maroon

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: \_\_\_\_\_

Veh No: SLA 9069 X Yt Regn: \_\_\_\_\_  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Honda Stream c.c. 1799  
 Colour: White A/C: Insured / Std / NI / NA  
 Sp. Reading: N.A. T/Radio: Insured / Std / NI / NA  
 Eng/No: RNG1088115  
 C/No: R18A1797713  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD AIRim or \_\_\_\_\_  
 Tyre Size: F: 205/65 R15  
 R: — 11 —

(Policy Condition)  
 Remark: The veh had commenced its  
 repair at the time of inspection.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: 4 days Res.: Yes or No  
 Lum Sum: 20 % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
 Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Yokohama  
 Front \_\_\_\_\_ Rear \_\_\_\_\_  
 R/Bal. S mm R/Bal. S mm  
 L/Bal. S mm L/Bal. S mm  
 D.O.A. 19/03/2018 D.O.I. 23/03/2018  
 Survey held at Teamwork Page ubi  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  
n/s Prnt  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Chine Taping YL 7423H
23/04/19	mm 4S 3000/- with 4 dgr of <u>mm</u> (Reel 4694.57, 61b)

RECEIVED 23 APR 2019

Date/Time, File Pass to?  : Preli. Report  
 : Final Report

Days Of Repair: 4  
 Resurvey No. of Trip: 2

Date/Time, File Return to?

2) 23/4 - typist

Report Format : merimen  
 Lump Sum / L.B.I. (\$) 3000/-

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

Survey Fee:	
Transportation:	
S + RS. \$	
Photos:	
Others:	
TOTAL	

## ...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Mar 2018		23 Mar 2018 13:44 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	<b>AGRESSO SERVICES PTE LTD</b>								
Main Claimant:	<b>WONG LEE CHUN, ID: S1404697F</b>								
Vehicle Reg. No.:	<b>SLA9069X</b>	Date of Loss:	19/03/2018 18:00 - :59						
Claim Type:	<b>TP / SNM18D01532C02</b>	Policy/Cover Note No.:	DMCVSN1646621701						
Vehicle Reg. No. (Insured):	<b>YL7423H</b>	Policy No. (Claimant):							
		Excess:	S\$0.00						
Repairer:	<b>Teamwork Garage Pte Ltd (HQ)</b> 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475								
Handling Insurer:	<b>China Taiping Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: 6389 6111 ... [Handled by <b>Jowyn Tay</b> - 6389 6174]								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... <b>[Final Rpt due 04/04/2018]</b>								
Adj Asg. Remarks:	PLEASE CONDUCT TP SURVEY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR SURVEY.								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## 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	20/03/2018 19:41
Date Of Accident	19/03/2018 18:00
Exact Location Of Accident	WOODLANDS AVE 12 TWDS GAMBAS AVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA9069X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MS WONG LEE CHUN
NRIC No	S1404697F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92352977
Alternative Phone No	OFFICE-92352977

### Vehicle Particulars

Manufacturer	HONDA
Model	STREAM 1.8X A
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MV003635-R01
Cover Note Number	

### Driver

Name of Driver	TEOH JING SHEN
NRIC No	S9444948J
Date Of Birth	01/12/1994
Occupation	INDOOR
Date Of Driving Pass	02/08/2013
Driving Experience	4 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96405117
Fax Number	
Contact Number	OFFICE-96405117
EMail Address	NOEMAIL

Address	BLK 824 WOODLANDS STREET 81 #09-20
Postcode	730824
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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)	2
Passenger 1	NAME: : WONG LEE CHUN 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

REFER TO STATEMENT.

#### 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	YL7423H
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	WONG JEE KOH @ WEE JEE KOH
NRIC/Passport Number	S0668223E
Contact Number	94874467
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	TEOH JING SHEN
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLA9069X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

**DETAILS OF INJURED PERSON 2**

Name	WONG LEE CHUN
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLA9069X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

# Accident Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

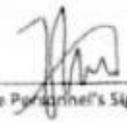
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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.

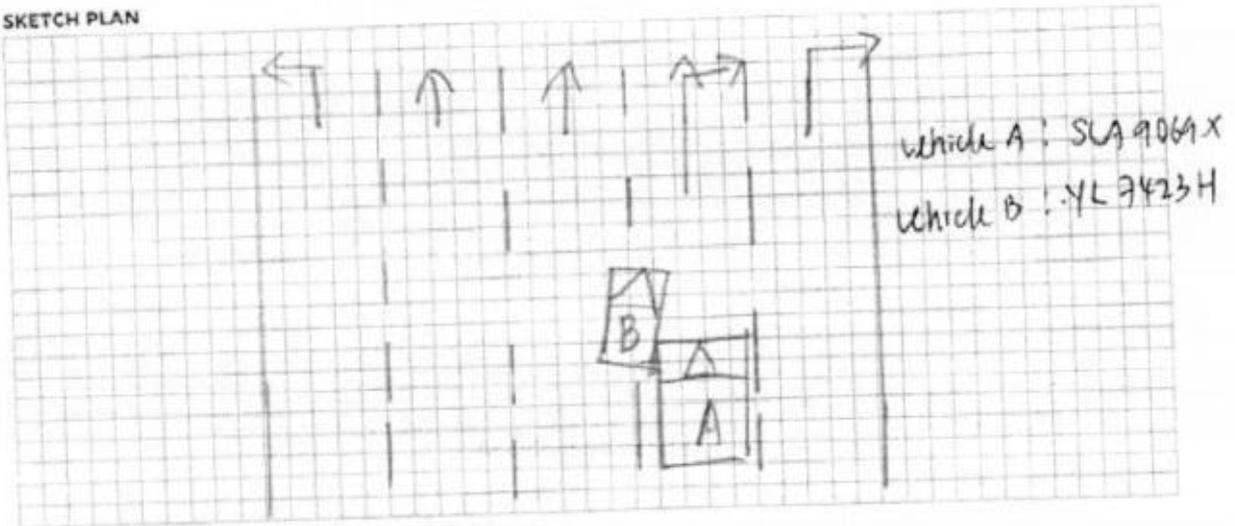
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along woodlands Avenue 12 towards Maribus Avenue on second lane. As the traffic was turning red vehicle B from my left wanted to cut into my lane. I immediately sounded my horn to warn him my present. However he ignored my horn and continue to cut in and resulted in colliding onto my vehicle front left portion.

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.:



TeamWork Garage Pte Ltd  
 53 Ubi Avenue 1 #01-23/24 Spore 408934  
 Paya Ubi Industrial Park  
 Tel : 6844 2475  
 E-mail : claims@teamworkgarage.com  
 Register number : 201015366H  
 3RD PARTY CLAIM ESTIMATION

China Taiping Insurance (Singapore) Pte Ltd  
 105 Cecil Street #19-00  
 The Octagon  
 Singapore 069534

Vehicle number	SLA9069X
Make / Model	HONDA/ STREAM
Chassis number	R18A1797713
Accident date	19 March 2018
Reference	1803-18

Qty	Particulars	Unit Price - SGD \$
<u>PARTS REPLACEMENT - LIST ITEMS</u>		
1	FRONT LH FENDER <i>Dented</i>	610.67 ✓
1	FRONT LH FENDER INNER <i>Trim damaged / torn</i>	118.60 ✓
1	FRONT LH FENDER EMBLEM <i>NH</i>	55.00 ✗
1	FRONT LH HEADLAMP <i>cut</i>	839.09 ✓
1	FRONT BUMPER <i>distorted / mainly crack</i>	763.90 ✓
2	FRONT SIDE RETAINER <i>o/s broken N/S NH</i>	18.10 36.20 ✓
1	FRONT BUMPER REINFORCEMENT <i>NH</i>	328.20 ✗
1	FRONT GRILLE <i>broken</i>	330.80 ✓
1	FRONT LH SHOCK ABSORBER <i>NH</i>	612.73 ✗
1	FRONT LH KNUCKLE <i>NH</i>	320.88 ✗
1	FRONT LH KNUCKLE BEARING <i>NH</i>	245.80 ✗
1	FRONT LH LOWER ARM <i>NH</i>	393.84 ✗
		4655.71
	2681.16 Less 20%	931.14
	2144.92 Subtotal	3724.57
	Balance C/F	3724.57
<u>PARTS REPLACEMENT - SPECIAL NETT ITEMS</u>		
	Balance B/F	3724.57
1 SET	FRONT BUMPER CLIP <i>NH</i>	60.00 30/-
1 SET	FRONT FENDER INNER CLIP <i>NH</i>	50.00 20/-
1	RIM <i>NH</i>	800.00 ✗
1	BRAKE FUILD <i>NH</i>	50.00 ✗
1	FRONT BUMPER LOWER LIP <i>broken</i>	800.00 500/-
	Subtotal	1760.00
	Balance C/F	5484.57
S/No	<u>LABOUR AND MISCELLANEOUS CHARGES</u>	
	Balance B/F	5484.57
1	CHECK FRONT WIRING AND LIGHTNING SYSTEM	60.00 30/-
2	CHECK FRONT WHEEL ALIGNMENT	150.00 NH

3	REMOVE AND REPLACE FRONT UNDERCARRIAGE PARTS		200.00 NH
4	PANEL BEATING ON AFFECTED AREAS		800.00 500/-
5	SPRAY PAINTING ON AFFECTED AREAS	1070.00	900.00 500/-
6	APPLY ANTI RUST ON AFFECTED AREAS		100.00 40/-
		Subtotal	2210.00
		Grand total	7694.57
			<del>3153.80</del>

23/03/2018 @ 1445h  
 not Andre  
 L/S m 4 days.

*[Signature]*  
 LKK Auto

L/S 2500/-  
 3764.92  
 L/S 3000/-

*[Signature]*

**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:

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	23 Mar 2018		23 Mar 2018 13:44 <a href="#">Edit Adj Rpt</a>	<b>S\$3,000.00</b> <a href="#">Edit Estimates</a>	<b>S\$3,000.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	<b>AGRESSO SERVICES PTE LTD</b> , Co. Reg. No.: 0		
Main Claimant:	<b>WONG LEE CHUN</b> , ID: S1404697F		
Vehicle Reg. No.:	<b>SLA9069X</b>	Date of Loss:	19/03/2018 18:00 - :59 [108 Months and 18 Days From LTA Reg Date (Man Yr)]
Claim Type:	<b>TP / SNM18D01532C02</b>	Policy/Cover Note No.:	DMCVSN1646621701
Vehicle Reg. No. (Insured):	<b>YL7423H</b>	Policy No. (Claimant):	
		Excess:	S\$0.00
Repairer:	<b>Teamwork Garage Pte Ltd (HQ)</b> 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park, 408934 Ubi - Tel: 6844 2475		
Handling Insurer:	<b>China Taiping Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: 6389 6111 ... [Handled by <b>Jowyn Tay</b> - 6389 6174]		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>BRYAN TANI</b> ] ... [Final Rpt due 04/04/2018]		
Adj Asg. Remarks:	PLEASE CONDUCT TP SURVEY, CHECK CONSISTENCY OF THE DAMAGES ON WITHOUT PREJUDICE BASIS. KINDLY LET US HAVE YOUR RECOMMENDED REPAIR AMOUNT IF THERE IS NO ESTIMATE PROVIDED DURING PRE REPAIR SURVEY.		

### ASSOCIATED MAIL RECEIVED

[View All](#)[Compose Case Mail](#)

There are no mail for this case.

### ALL ASSOCIATED TASKS

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									



## Claim Documents

\*SLA9069X (SNM18D01532C02)  
 [YL7423H]  
 TP  
 WONG LEE CHUN  
 Mar 19 2018 6:00PM  
 [AGRESSO SERVICES PTE LTD]  
 Teamwork Garage Pte Ltd

<a href="#">Upload Documents</a> <a href="#">Upload Photos</a> <a href="#">Compose New Letter</a>			View <a href="#">View in Browser</a> ▼
Photos/Images			3 per page ▼ <input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail <input checked="" type="checkbox"/>
1	12/04/19 15:51	Front View Right	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
2	12/04/19 15:51	Front View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
3	12/04/19 15:51	Front View Left	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
4	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
5	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
6	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
7	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
8	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
9	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
10	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
11	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
12	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
13	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
14	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
15	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
16	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
17	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
18	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
19	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
20	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
21	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
22	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
23	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
24	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
25	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
26	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
27	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
28	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
29	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
30	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
31	12/04/19 15:52	General View	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
32	12/04/19 15:52	Chassis Number	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
33	12/04/19 15:53	Reinspection Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
34	12/04/19 15:53	Reinspection Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>
35	12/04/19 15:53	Reinspection Photo	<input checked="" type="checkbox"/> Load JPG <input checked="" type="checkbox"/>

Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
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Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
84	12/04/19 15:54	<b>Finishing Photo</b>	 Load JPG	<input checked="" type="checkbox"/>

Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	23/03/18 13:45	<b>THIRD PARTY SLA9069X -PRS EMAIL BTW CIC AND TEAMWORK GARAGE</b>	 Load PDF	
2	23/03/18 13:45	<b>THIRD PARTY SAS REPORT</b>	 Load PDF	
3	09/04/18 11:24	<b>INSURED SAS REPORT YL7423H</b>	 Load PDF	

## Documents Checklist

### DOCUMENTS CHECKLIST

Reset

Save

Print

There are no document checklists configured.

### Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

Show Remarks To:  Handling Insurer

Note: Remarks are private unless you show it to other parties.

## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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:** CS/CT118005580/DVD3S2  
**Date:** 24/04/2019

## REFERENCE

Handling Insurer: China Taiping Insurance (Singapore) Pte. Ltd. Policy No: DMCVSN1646621701  
 Claimant Vehicle No: SLA9069X Insured Vehicle No: YL7423H  
 Date of Loss: 19/03/2018 Nature of Claim: TP Claim No: SNM18D01532C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: **SLA9069X**  
 Make & Model: HONDA STREAM, 1.8 X (A) Engine No: R18A1797713  
 Reg. Date: 01/03/2009 (Man. Year: 2009) Chassis No: RN61088115  
 Colour: White Odometer: 0 km  
 Engine Capacity: 1799 cc  
 Market Value/New Car Price: N/A  
 Sum Insured (S\$): **Market Value/New Car Price**

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Good Steering (Serviceable): Yes Footbrake (Serviceable): Yes  
 Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

## CONDITION OF TYRES

Front Tyre Size: 205/65R15 Rear Tyre Size: 205/65R15  
 Front Left Side: Yokohama 5 mm Rear Left Side: Yokohama 5 mm  
 Front Right Side: Yokohama 5 mm Rear Right Side: Yokohama 5 mm

The above values represent the remaining tyre treads depth.

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	5,484.57	2,694.93	2,789.64	50.86
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,210.00	1,070.00	1,140.00	51.58
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>7,694.57</b>	<b>3,764.93</b>	<b>3,929.64</b>	<b>51.07</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>3,000.00</b>		
	(S\$) 7,694.57	3,000.00	4,694.57	61.01
<b>+ GST 7.00/7.00% (S\$)</b>	538.62	210.00	328.62	61.01
<b>Nett Amount (S\$)</b>	<b>8,233.19</b>	<b>3,210.00</b>	<b>5,023.19</b>	<b>61.01</b>

## INSPECTION

Date of Assignment: 23/03/2018  
 Date Inspected: 23/03/2018 Inspected At: Teamwork Garage Pte Ltd (HQ)  
 53 Ubi Ave 1 #01-24, Paya Ubi Industrial Park  
 Singapore 408934  
 Estimated Period of Repair: 4.0 days

Adjuster: BRYAN TANI

Manager: VERON CHEN

*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

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 24 Apr 2019)
<b>Parts:</b> M1-MPV	HONDA STREAM 1.8 X (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b> (Unsubmitted, no print-code for SLA9069X)	
<b>Validity:</b>	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT LH FENDER	Dented	610.67 FL	*610.67 FL
2	1		*FRONT LH FENDER INNER TRIM	Deformed/Torn	118.60 FL	*118.60 FL
3	1		*FRONT LH FENDER EMBLEM	Not Necessary	55.00 FL	*- FL
4	1		*FRONT LH HEADLAMP	Cut	839.09 FL	*839.09 FL
5	1		*FRONT BUMPER	Distorted/Mounting Cracked	763.90 FL	*763.90 FL
6	1		*FRONT SIDE RETAINER	O/s Broken/N/s Not Necessary	36.20 FL	*18.10 FL
7	1		*FRONT BUMPER REINFORCEMENT	Not Necessary	328.20 FL	*- FL
8	1		*FRONT GRILLE	Broken	330.80 FL	*330.80 FL
9	1		*FRONT LH SHOCK ABSORBER	Not Necessary	612.73 FL	*- FL
10	1		*FRONT LH KNUCKLE	Not Necessary	320.88 FL	*- FL
11	1		*FRONT LH KNUCKLE BEARING	Not Necessary	245.80 FL	*- FL
12	1		*FRONT LH LOWER ARM	Not Necessary	393.84 FL	*- FL
13	1		*SET FRONT BUMPER CLIP	Necessary	60.00 FS	*30.00 FS
14	1		*SET FRONT FENDER INNER CLIP	Necessary	50.00 FS	*20.00 FS
15	1		*RIM	Not Necessary	800.00 FS	*- FS
16	1		*BRAKE FLUID	Not Necessary	50.00 FS	*- FS
17	1		*FRONT BUMPER LOWER LIP	Broken	800.00 FS	*500.00 FS

F=Franchise part. S=SpcNett. L=ListItemDisc.

<b>Sub Total (\$\$)</b>	<b>6,415.71</b>	<b>3,231.16</b>
<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	931.14	536.23
<b>Total Parts (\$\$)</b>	<b>5,484.57</b>	<b>2,694.93</b>

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<b>Labour Items</b>				
1	CHECK FRONT WIRING AND LIGHTING SYSTEM	New	60.00	30.00
2	CHECK FRONT WHEEL ALIGNMENT	New	150.00	0.00
3	REMOVE AND REPLACE FRONT UNDERCARRIAGE PARTS	New	200.00	0.00
4	PANEL BEATING ON AFFECTED AREAS	New	800.00	500.00
5	SPRAY PAINTING ON AFFECTED AREAS	New	900.00	500.00
6	APPLY ANTI RUST ON AFFECTED AREAS	New	100.00	40.00
<b>Gross Labour Cost (S\$)</b>			<b>2,210.00</b>	<b>1,070.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >