INS. CASE OWNER:

CC 3/III1800 6488 , Feb 3 91

LKK:
IDAC:

ASSIGNMENT

Surveyor: Kenneth

DOI: 6/4/18

Date / Time: 6/4/18

Registered in Merimen: 9/4/18

Pre-assign / CCU / FTE

Insured Vehicle No. :	SH 8725Y	Claim No. :	MCT18044100
Name of Insured :	LTPL	Policy No. :	MCDM00 C5
Insured Tel No. :	HP:	Make / Model :	HYUNDAI
Excess Sec II :S$	D.O.A : 4/4/18	Place of Accident :	SENTOSA CASINO TAXI DROP OFF POINT
Is driver the owner? (YES / NO)	Nature of Accident :	OI GIA REPORT: YES / NO	TP GIA REPORT: YES / NO
If **NO**, Driver Name / Age : KHARIS B KASMAN	Driver Tel No. : (V/L: YES / NO)	Insured Liability : %	**Final ? Yes / No**

SHD 9970U → → →

INSRS: Tians Cab WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
11/4/18 Anhar	SHD9970U — 11/4/18 ...
	SH 8725Y — 4
13/04/18	SEEK MANDATE FOR LIABILITY.
20/4/18	MANDATE APPROVE LIABILITY.
27.8.18	FILE PASS TO TYPIST TO PREPARE REPORT.

STAGE	**DATE / PIC**
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	
After call ltr to OI:	

Documentation Check List:	**Handler**	**Typist**
Notification ltr (if non-pickup):		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher:	✓	
Final Repair Bill:	✓	
Car Rental Invoice:	✓	
Towing Invoice:		
LTA / GIA :		
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: - Sent By: -

FINALIZATION	Date/Time: 7-6-18	Confirm with: Jasmine	Confirm by: KSL
Repair Cost: U/S	S$ 3,300 (3 days)	Reduction: 87 %	Email ✓ Call
FINAL SETTLEMENT	Date/Time: 5.10.18	Confirm with Jasmine	Email ✓ Call
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: W/GST	S$3,424.00	DID HIT A STATIONARY TP.	COPY SENT
Loss of Rental (LOR):	S$ 405.84 (4 days) x 101.46		
Loss of Use (LOU):	S$ - (S$ x days)		
Loss of Income (LOI):	S$ 200.00 (S$ 50 x 4 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑	[Tick only one]	
GIA/LTA Search	S$ -		
Medical:	S$ -		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee:
Total:	S$4,029.84	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 5.10.18	Confirm with: Jasmine	Email ✓ Call
Payee 1:	S$4,029.84	Name 1: TRANS-CAB AUTO SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

ASS. REC. BY: Kenneth

REF: TE /

ASSIGNMENT

From: ______ Date: ______

Estimated Cost: ______

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

To Inspect Vehicle No: ______

at Workshop m/s Trans Cab

of ______

Insured: ______

Policy No. ______

Claims No. ______

Sum Insured: ______ Excess: ______

(Client's Record)

Make of Veh: ______

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: ______

IDAC Accident Rport: ______ Consistent? : Yes or No

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

Est. Repairs: 02 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SH 0 9920U Yr Regn: 06, 14

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

Make: Peugeot Lantude c.c 1995

Colour M-White / Red A/C: Insured / Std / NI / NA

Sp.Reading 533608 T/Radio: Insured / Std / NI / NA

Eng/No: ______

C/No: VF1AB2 15AUC 277 504

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: Citi 215/60R16

R: Falken

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	7 mm
L/Bal.	8 mm	L/Bal.	7 mm
D.O.A.	4/4/18	D.O.I.	6/4/18

Survey held at ______

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

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

Date / Time	Action / Instruction
9/4	File pass to Catherine
7/6/18	L/Sp. @ 3200l Confirm Jeremy (2 +2 X101.46 + 160)
	(RSD : $30,560.36 87%

Date/Time, File Pass to? 1) ______

Date/Time, File Return to? 2) ______

☐ : Prell. Report

☐ : Final Report

Days Of Repair: ______

Resurvey No. of Trip: ______

Add Fee: ☐ : Site Insp ($ ______)

☐ : Interview ($ ______)

☐ Tech. Invs ($ ______)

☐ Weekend ($ ______)

Survey Fee:

Transportation: __$ + RS__SI

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I: ($ ______)

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

INDIA INTERNATIONAL INSURANCE PL

64 CECIL STREET
#05-02 IOB BUILDING SINGAPORE 049711

Ref : CC3/III18006488/Keb3
Date : 09-04-2018
Code : III2

1.	**Policy Particulars :- THIRD PARTY CLAIM**			
	Insured Veh.	SH 8725Y	**Veh. Inspected**	SHD 9920U
	Policy No.		**Coverage ($)**	0.00
	Claim No.		**Excess ($)**	0.00
	Assign From		**Assign Date**	09/04/2018
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	04/04/2018	**Inspection Date**	06/04/2018
	Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		
5a.	**Remarks**			
	A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666   Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9920U

Not Authorised
U/Sup $320 ok

AAD1804-057

Vehicle No.:	**SHD 9920U**
Chassis No.:	VF1ABL15AUC277504
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE
Date of Accident :	4.4.2018
Third Party Insurer :	**III**

	PART		**LIST**
1	BUMPER COVER FRT	$	1,259.42
1	BUMPER SPOILER FRT	$	181.75
1	BUMPER ABSORBER FRT	$	394.68
1	BUMPER RETAINER FRT LH	$	151.41
1	BUMPER SUPPORT FRT	$	123.88
1	BUMPER RETAINER FRT RH	$	150.77
1	BUMPER SUPPORT FRT	$	123.88
1	BUMPER UNDERTRAY FRT	$	472.83
1	BUMPER GRILLE LOWER FRT	$	266.80
1	BUMPER FOG LAMP GRILLE RH	$	207.21
1	BUMPER BEAM FRT	$	914.08
1	HEADLAMP RH	$	1,184.43
1	HEADLAMP PANEL FRT RH	$	152.15
1	FENDER PANEL FRT RH	$	783.83
1	WHEELARCH FRT RH	$	278.84
1	FENDER BRACKET LOWER RH	$	15.79
1	FENDER INSULATOR RH	$	130.84
1	DOOR PANEL FRT RH	$	2,844.66
1	RADIATOR GRILLE	$	1,707.78
1	RADIATOR GRILLE BADGE 'RENAULT'	$	225.36
1	RADIATOR GRILLE FRAME	$	1,353.75
1	RADAITOR FAN COWLING	$	820.54
1	RADIATOR FAN MOTOR LH	$	967.36
1	RADIATOR FAN MOTOR RH	$	1,479.46
		TOTAL $	**16,191.51**
		10% $	**1,619.15**
		$	**14,572.36**

Trans-cab Auto Services Pte Ltd **AAD1804-057**

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9920U

Specical Nett

1SET	BUMPER CLIP FRT	$	na	66.00	✓
1	BUMPER BRACKET CLIP FRT RH	$	na	12.00	X
1	BUMPER SUPPORT CLIP FRT RH	$	na	10.50	
1SET	BUMPER GRILLE LOWER CLIP	$	na	69.00	
1SET	FRAME FULL SUPPORT PANEL CLIP	$	na	70.00	
2	FRAME FULL SUPPORT PANEL NUT	$	na	20.00	
2	FRAME FULL SUPPORT PANEL STUD	$	na	30.00	
1SET	WHEELARCH CLIP FRT RH	$	na	30.50	
1	FRONT DOOR STICKER 'Trans-cab'	$	na	80.00	
1	FRONT DOOR STICKER 'Chassis'	$	na	50.00	
	TOTAL	**$**		**438.00**	
	TOTAL PARTS	**$**		**15,010.36**	

LABOUR

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	$		3,500.00	40cl
Putty and spray painting of the affected portion.	$		3,000.00	44cl
To rust-proofing of the affected areas.	$		170.00	3cl
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	$	na	380.00	X
To check steering geometry and computer wheel alignment	$	na	220.00	X
To transfer of tire, rim and on wheel balancing.	$	na	170.00	X
To Check Electrical Lighting Concerned.	$		170.00	2cl

Trans-cab Auto Services Pte Ltd **AAD1804-057**

No. 2 Ang Mo Kio Street 63 Singapore 569111
Tel No. : 6287 6666 Fax No. : 6257 1330
CO./GST Reg. No. 201019626G

SHD 9920U

To transfer of front fender fittings, attachment and perform water seepage test.	$	380.00
To vacuum, replace, refix and recharge air condenser	$	380.00
To replace, refix and top up coolant for radiator	$	170.00
To vacuum, replace, refix and recharge Air Intercooler	$	170.00
TOTAL	**$**	**8,710.00**
Over All Total	**$**	**23,720.36**

LUMP SUM (REPAIR DAY) ~~**10**~~ **DAYS**
2 days

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:

Print Received Message

This mail is associated with :

***SHD9920U (MCT18040100)**
[SH8725Y]
TP
TRANS-CAB SERVICES PTE LTD
Apr 4 2018 9:00PM
[COMFORT TRANSPORTATION PTE LTD]
Trans-cab Auto Services Pte Ltd

From **India International Insurance Pte Ltd (HQ) (III_SG)**, sent on **20/04/2018 09:13 AM**.
To LKK_HQ
Subject **Alert - Adj Mandate Approved (S$0.00) - SHD9920U - Claim Handler: Priya**

Approved:0.00.

AUDIT TRAIL

No.	On	Audit	Remarks	By
22	09 Jul 2018 09:03	**Clm Details Notified**		[A] Lau Shu Pei
23	03 Oct 2018 14:33	**Adj Mandate Request**	Cur.Req:4029.84:PODS: LIABILITY: 100% QUANTUM: (a) COR w/GST : $3,424.00 + (b) LOR : $405.84 (4days x $101.46) + LOI : $200.00 (4days x $50) Total: a+b+c = $4,029.84 VEH MODEL: RENAULT LATITUDE 1995cc PLEASE REVERT WITH YOUR APPROVAL / MANDATE /	[A] Asher Sng Rong Yi

Date From **Date To** **Audit Type** None Go

ACTIVITY

No record

Merimen Billing for this case - Transaction History

Bill Ref No	Bill Date	Acc Type	Acc Name	Co Name (Branch)	Ref 1	Ref 2	Amount
1775712	13/04/2018 10:11	Motor	India International Insurance Pte Ltd (HQ)	India International Insurance Pte Ltd (HQ)	SHD9920U	Priya	xx.xx
1853467	09/07/2018 09:03	Motor	LKK Auto Consultants Pte Ltd	LKK Auto Consultants Pte Ltd (HQ)	SHD9920U	SH8725Y	10.70

Print Received Message

This mail is associated with :

***SHD9920U (MCT18040100)**
[SH8725Y]
TP
TRANS-CAB SERVICES PTE LTD
Apr 4 2018 9:00PM
[COMFORT TRANSPORTATION PTE LTD]
Trans-cab Auto Services Pte Ltd

From **India International Insurance Pte Ltd (HQ) (III_SG)**, sent on **08/10/2018 17:09 PM**.
To LKK_HQ
Subject **Alert - Adj Mandate Approved (S$4029.84) - SHD9920U - Claim Handler: Priya**

Approved:4029.84.

Trans-Cab Services Pte Ltd
No. 2 Ang Mo Kio Street 63
Tel No.: 6287 6666 Fax No. 6281 1400
Co./GST Reg. No. 200303878K

Our Ref : AAD1804-057
Your Ref : SH8725Y
Date : 08.August 2018

INDIA INT'L INS PTE LTD

Dear Sir/Madam,

ACCIDENT INVOLVING SHD9920U AND SH8725Y ON 04/04/18 10:00 PM ALONG SENTOSA CASINO DROP OFF POINT

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	$	3,424.00
2.	Loss of Rental for 4 days @ $[illegible] per day	$	405.84
3.	Loss of Income for 4 days @ $50.02 per day	$	200.00
4.	LTA Search Fee	$	0.00
5.	Survey Fee	$	0.00
	Total	$	4,029.84

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver
Certificate of Insurance
Original final repair bill
Rental rate and mileage records
Authorization To Act
LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully
Trans-Cab Services Pte Ltd

Jasmine Tan
General Manager
Tel No. : 6603 1250 (DID)
Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)

Trans-Cab Services Pte Ltd
No. 2 Ang Mo Kio Street 63
Tel No.: 6287 6666 Fax No. 6281 1400
Co./GST Reg. No. 200303878K

Authorization To Act

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHD9920U and SH8725Y along SENTOSA CASINO DROP OFF POINT on 04/04/18 10:00 PM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 8 (day) of August 2018

Yours Faithfully
Trans-Cab Services Pte Ltd

Jasmine Tan
General Manager

INDIA INTERNATIONAL INSURANCE
SINGAPORE
Serving the region since 1987

INDIA INTERNATIONAL INSURANCE PTE LTD
Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X
64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
Office (65) 63476100 Email insure@iii.com.sg
Fax (65) 62244174 Website www.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER
III-Direct Settlement (PODS)

India Ref: [illegible]
Claimant Ref: [illegible]

We/I, TRANS-CAB AUTO SERVICES PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S$ 3,424.00 (repair cost), S$ 605.84 (loss of use/rental), S$ – (search fee), vehicle no. [illegible] that was damaged pursuant to the accident which occurred on 14.04.2018 (date) at SENTOSA GRAND DROP OFF POINT (location) involving vehicle no. [illegible] (insured vehicle). This is pursuant to the inspection conducted on 16.04.2018 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner TRANS-CAB SERVICES PTE LTD ("the third party claimant") of vehicle no. [illegible] to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to [illegible] (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S$ 4,029.84 to TRANS-CAB AUTO SERVICES PTE LTD.

Dated this [illegible] day of OCT 20 18

CLAIMANT:

Signature: ____________
Signed by "the workshop" (with chop)

Name: JASMINE TAN SIEW KIM

NRIC: S7405636I

Address: TRANS-CAB AUTO SERVICES PTE LTD
No. 2 Ang Mo Kio Street 63 S'pore 569111

Nationality: SINGAPOREAN

Occupation: GM

WITNESS:

LKK

Signature: ____________
Signed by appointed Surveyor

Name: LKK Auto Consultants Pte Ltd

NRIC: 199607198R

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

Nationality: -

Occupation: -

Trans-Cab Auto Services Pte Ltd
No. 2 Ang Mo Kio Street 63 Singapore 569111
Tel: 6287 6666
Fax: 6287 7764
Co. Reg. No.: 201019626G
GST Reg. No.: 201019626G

Tax Invoice / Debit Note

TO:
INDIA INTERNATIONAL INSURANCE PTE LTD
64 CECIL STREET
#05-00 IOB BUILDING
049711 Singapore

ATTENTION:

INVOICE NO. : INV1807-281
DATE : 31. July 2018
REFERENCE NO : AAD1804-057
TERMS :
DUE DATE : 31. July 2018
PAGE : 1

NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD9920U;DOA 04.04.18(LUMP SUM-18)	1	3,424.00	3,424.00

Total SGD Excl. GST :	**3,200.00**
7% GST :	**224.00**
Total SGD Incl. GST :	**3,424.00**

****** THREE THOUSAND FOUR HUNDRED TWENTY FOUR SGD ONLY ******

1) All cheques should be crossed and made payable to"Trans-Cab Auto Services Pte Ltd"
2) Please quote our Invoice Number during payment.
3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.
4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.

THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE

Trans-Cab Services Pte Ltd
No. 2 Ang Mo Kio Street 63
Tel No.: 6287 6666 Fax No. 6281 1400
Co./GST Reg. No. 200303878K

08 August, 2018

To Whom It May Concern

Dear Sir / Madam,

Accident on 04/04/18 10:00 PM at SENTOSA CASINO DROP OFF POINT

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHD9920U. The taxi was hired to QUAH CHENG HWEE a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate $101.46 per day (inclusive of GST).

2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.

3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

This is a computer generated print-out. No signature is required.

Trans-Cab Services Pte Ltd
No. 2 Ang Mo Kio Street 63
Tel No.: 6287 6666 Fax No. 6281 1400
Co./GST Reg. No. 200303878K

04-04-2018

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.		
Accident No.	AAD1804-057		**Accident Date**	04-04-2018
5/4/2018 08:45	9/4/2018 17:30	SHD9920U		

Yours Faithfully,

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

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

Direct Settlement

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	10 Apr 2018 Edit Reg		06 Apr 2018 00:00 Edit Adj Rpt	**S$3,200.00** Edit Estimates	**S$3,200.00** View Rpt		**Pending for Survey Report** Cancel Case

Main | Reference | Claim Details | Documents | Show All

CLAIM SUBFOLDER DETAILS			[Created by adjuster]
Insured:	**COMFORT TRANSPORTATION PTE LTD**, Co. Reg. No.: -		
Main Claimant:	**TRANS-CAB SERVICES PTE LTD**, Co. Reg. No.: 200303878K		
Vehicle Reg. No.:	**SHD9920U**	Date of Loss:	04/04/2018 21:00 - :59 [**45** Months and **30** Days From LTA Reg Date (Man Yr)]
Claim Type:	**TP** / MCT18040100	Policy/Cover Note No.:	MCOM0015
Vehicle Reg. No. (Insured):	**SH8725Y**	Policy No. (Claimant):	VPX/P1680520
		Excess:	
Repairer:	**Trans-cab Auto Services Pte Ltd ()** No 2 Ang Mo Kio Street 63, 569111 Ang Mo Kio - Tel:		
Handling Insurer:	**India International Insurance Pte Ltd (HQ)** - Tel: 63476100 ... [Handled by **Priya**]		
Claimant's Insurer:	**AXA Insurance Pte Ltd (HQ)** - Tel: 6338 7288		
Adjuster:	**LKK Auto Consultants Pte Ltd (HQ)** - Tel: 6256-3561 ... [Handled by **KENNETH KONG**] ... [**Final Rpt** due 18/04/2018]		

ASSOCIATED MAIL RECEIVED View All | Compose Case Mail

- III_SG (08/10/2018): **Alert - Adj Mandate Approved (S$4029.84) - SHD9920U - Claim Handler: Priya**
- III_SG (03/10/2018): **Alert - Adj Mandate Maintained - SHD9920U - Claim Handler: Priya**
- III_SG (20/04/2018): **Alert - Adj Mandate Approved (S$0.00) - SHD9920U - Claim Handler: Priya**
- III_SG (13/04/2018): **Alert - Adj Mandate Maintained - SHD9920U - Claim Handler: Priya**

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

***SHD9920U (MCT18040100)**
[SH8725Y]
TP
TRANS-CAB SERVICES PTE LTD
Apr 4 2018 9:00PM
[COMFORT TRANSPORTATION PTE LTD]
Trans-cab Auto Services Pte Ltd

Upload Documents | Upload Photos | Compose New Letter — **View** View in Browser

Video			1 per page		
No	Finalized On	**India International Insurance Pte Ltd (HQ)**		**Thumbnail**	**Print**
1	13/04/18 10:11	**Video - Accident**		Load MP4	

Photos/Images			3 per page		
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1	03/10/18 14:34	**General View**		Load JPG	☑
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7	03/10/18 14:34	**General View**		Load JPG	☑
8	03/10/18 14:34	**General View**		Load JPG	☑
9	03/10/18 14:34	**General View**		Load JPG	☑
10	03/10/18 14:34	**General View**		Load JPG	☑
11	03/10/18 14:34	**Odometer Reading**		Load JPG	☑
12	03/10/18 14:34	**Chassis Number**		Load JPG	☑
13	03/10/18 14:34	**General View**		Load JPG	☑

Documentation			1 per page		
No	**Relabel/Reorder**	**LKK Auto Consultants Pte Ltd (HQ)**		**Thumbnail**	**Print**
1	09/04/18 17:35	**TP GIA REPORT**		Load PDF	
2	09/04/18 17:35	**TP ESTIMATE- MARKED**		Load PDF	
3	25/09/18 09:15	**WORKSHOP INVOICE**		Load PDF	
4	25/09/18 09:15	**RENTAL RECEIPT**		Load PDF	
5	25/09/18 09:15	**LOD**		Load PDF	
6	08/10/18 14:59	**LOG CARD**		Load PDF	
7	22/10/18 11:25	**DISCHARGE VOUCHER**		Load PDF	
8	22/10/18 11:25	**AUTHORISATION TO ACT FORM**		Load PDF	
No	Finalized On	**India International Insurance Pte Ltd (HQ)**		**Thumbnail**	**Print**
1	10/04/18 08:53	**Singapore Accident Statement**		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: CC3/III18006488/KEB3Q2
Date: 22/10/2018

REFERENCE

Handling Insurer:	India International Insurance Pte Ltd	Policy No:	MCOM0015	
Claimant Vehicle No :	SHD9920U	**Insured Vehicle No :**	SH8725Y	
Date of Loss:	04/04/2018	Nature of Claim:	TP	Claim No: MCT18040100

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	**SHD9920U**		
Make & Model:	RENAULT LATITUDE, 2.0 L (A)	Engine No:	M9R8839C001333
Reg. Date:	05/06/2014 (Man. Year: 2014)	Chassis No:	VF1ABL15AUC277504
Colour:	Metallic White/Red	Odometer:	533608 km
Engine Capacity:	1995 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:		Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	

CONDITION OF TYRES

Front Tyre Size:	215/60 R16	Rear Tyre Size:	215/60 R16
Front Left Side:	Citi 8 mm	Rear Left Side:	Falken 7 mm
Front Right Side:	Citi 8 mm	Rear Right Side:	Falken 7 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	15,010.35	3,106.60	11,903.75	79.30
Miscellaneous Items	0.00	0.00	0.00	
Labour	8,710.00	890.00	7,820.00	89.78
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S$)	**23,720.35**	**3,996.60**	**19,723.75**	**83.15**
Approved Total (Overridden) (S$)		**3,200.00**		
(S$)	23,720.35	3,200.00	20,520.35	86.51
+ GST 7.00/7.00% (S$)	1,660.42	224.00	1,436.42	86.51
Nett Amount (S$)	**25,380.77**	**3,424.00**	**21,956.77**	**86.51**
+ Loss of Use (4.0 x S$50.00/day) (S$)		200.00		
+ Car Rental (4.0 x S$101.46/day) (S$)		405.84		
Nett Liability (S$)		**4,029.84**		

INSPECTION

Date of Assignment:	06/04/2018		
Date Inspected:	06/04/2018	Inspected At:	Trans-cab Auto Services Pte Ltd No 2 Ang Mo Kio Street 63 Singapore 569111

Estimated Period of Repair: 2.0 days

Adjuster: KENNETH KONG

Manager: Asher Sng Rong Yi

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: 25 Sep 2018)
Parts:	143	RENAULT LATITUDE 2.0 L (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD9920U)	
Validity:	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	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*BUMPER COVER FRT	Mtg Cracked	1,259.42 FL	*1,259.42 FL
2	1		*BUMPER SPOILER FRT	Serviceable	181.75 FL	*- FL
3	1		*BUMPER ABSORBER FRT	Serviceable	394.68 FL	*- FL
4	1		*BUMPER RETAINER FRT LH	Serviceable	151.41 FL	*- FL
5	1		*BUMPER SUPPORT FRT	Serviceable	123.88 FL	*- FL
6	1		*BUMPER RETAINER FRT RH	Distorted	150.77 FL	*150.77 FL
7	1		*BUMPER SUPPORT FRT	Serviceable	123.88 FL	*- FL
8	1		*BUMPER UNDERTRAY FRT	Serviceable	472.83 FL	*- FL
9	1		*BUMPER GRILLE LOWER FRT	Serviceable	266.80 FL	*- FL
10	1		*BUMPER FOG LAMP GRILLE RH	Serviceable	207.21 FL	*- FL
11	1		*BUMPER BEAM FRT	Repair	914.08 FL	*- FL
12	1		*HEADLAMP RH	Mtg Cracked	1,184.43 FL	*1,184.43 FL
13	1		*HEADLAMP PANEL FRT RH	Repair	152.15 FL	*- FL
14	1		*FENDER PANEL FRT RH	Bent	783.83 FL	*783.83 FL
15	1		*WHEELARCH FRT RH	Serviceable	278.84 FL	*- FL
16	1		*FENDER BRACKER LOWER RH	Serviceable	15.79 FL	*- FL
17	1		*FENDER INSULATOR RH	Serviceable	130.84 FL	*- FL
18	1		*DOOR PANEL FRT RH	Repair	2,844.66 FL	*- FL
19	1		*RADIATOR GRILLE	Serviceable	1,707.78 FL	*- FL
20	1		*RADIATOR GRILLE BADGE RENAULT	Serviceable	225.36 FL	*- FL
21	1		*RADIATOR GRILLE FRAME	Serviceable	1,353.75 FL	*- FL
22	1		*RADIATOR FAN COWLING	Serviceable	820.54 FL	*- FL
23	1		*RADIATOR FAN MOTOR LH	Serviceable	967.36 FL	*- FL
24	1		*RADIATOR FAN MOTOR RH	Serviceable	1,479.46 FL	*- FL
25	1		*SET BUMPER CLIP FRT	Necessary	66.00 FS	*66.00 FS
26	1		*BUMPER BRACKET CLIP FRT RH	Not Necessary	12.00 FS	*- FS
27	1		*BUMPER SUPPORT CLIP FRT RH	Not Necessary	10.50 FS	*- FS
28	1		*SET BUMPER GRILLE LOWER CLIP	Not Necessary	69.00 FS	*- FS
29	1		*SET FRAME FULL SUPPORT PANEL CLIP	Not Necessary	70.00 FS	*- FS
30	2		*FRAME FULL SUPPORT PANEL NUT	Not Necessary	20.00 FS	*- FS
31	2		*FRAME FULL SUPPORT PANEL STUD	Not Necessary	30.00 FS	*- FS
32	1		*SET WHEELARCH CLIP FRT RH	Not Necessary	30.50 FS	*- FS
33	1		*FRONT DOOR STICKER TRANS-CAB	Not Necessary	80.00 FS	*- FS
34	1		*FRONT DOOR STICKER CHASSI	Not Necessary	50.00 FS	*- FS

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

Sub Total (S$)	**16,629.50**	**3,444.45**
- List Item Discount on L Items 10.00/10.00% (S$)	1,619.15	337.85
Total Parts (S$)	**15,010.35**	**3,106.60**

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
	Labour Items			
1	PANEL BEATING ,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS ,ADJUST AND REALIGN THE SAME	New	3,500.00	400.00
2	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION	New	3,000.00	440.00
3	TO RUST-PROOFING OF THE AFFECTED AREAS	New	170.00	30.00
4	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH,FITTINGS AND OTHER ,TO ENABLE REPAIR	New	380.00	0.00
5	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT	New	220.00	0.00
6	TO TRANSFER OF TIRE ,RIM AND ON WHEEL BALANCING	New	170.00	0.00
7	TO CHECK ELECTRICAL LIGHTING CONCERNED	New	170.00	20.00
8	TO TRANSFER OF FRONT FENDER FITTINGS ,ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	New	380.00	0.00
9	TO VACUUM ,REPLACE ,REFIX AND RECHARGE AIR CONDENSER	New	380.00	0.00
10	TO REPLACE ,REFIX AND TOP UP COOLANT FOR RADIATOR	New	170.00	0.00
11	TO VACUUM ,REPLACE ,REFIX AND RECHARGE AIR INTERCOOLER	New	170.00	0.00
		Gross Labour Cost (S$)	**8,710.00**	**890.00**

Report was unsubmitted during this print-out.

< END OF ESTIMATES >