

22/03/2018

ASS. REC. BY:

REF:

CS/ASM18007563/Kvb32

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

Smart claim

Winnie Ho

of

ASM

Date/Time: 24/04/2018 3:17pm

Estimated Cost:

Bill to:

① TP/WS/TP RES/OD RES/EVA/INV/MV/CS

To Inspect Vehicle No:

GBA 60356

Insured:

at Workshop m/s

Guan motor.

Tel:

6453 6111

of

176 Sin Ming Drive #02-08

Policy No:

Claim No:

SS MOBILE

Sum Insured:

Excess:

\$ TBA 900

Make of Veh:

D.O.A.

19.04.2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

25.04.2018

H.O.D. Endorsement:

Date/Time: 24/04/2018 3:19pm

Person Contacted:

MS-TEO

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate	Get authorise letter from owner, Drivers IC & DL
	GBA 60356 - CS/CTU7000594/Kvb32	DCA: 0401-1017
26/4/18	Revert by SMART claim, pending authorise letter	
2/5/18	Rece authorise repair on LS repair - \$6250	
2/5/18	Informed Ah Guan c/A on LS repair ex TBA	
2/5/18	@ 150pm Informed MS Teo ex \$900	

REF:

ASM (AXA)

Smart claim

ASSIGNMENT

From:

Date:

25/04/2018

Estimated Cost:

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

To Inspect Vehicle No:

GBA 60356

at Workshop m/s

Guan Motor

of

176 Sin Ming Drive #07-03

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

TBA

(Client's Record)

Make of Veh:

Got authouse letter & Driver's

(Policy Condition)

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

Bal. or Market Value:

835K

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

05

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV

REP. / 24 HRS

Date:

4/22

Person Contacted:

Vehicle: IN / OUT

Veh No.

GBA 60356

Yr Regn:

09 07

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

Truck / Trailer or

Make:

Toy Hiau

C.C.

2P82

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

282976

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JTK11T02 P00 0005694

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:

1P5R15X8

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

9

mm

R/Bal.

7

mm

L/Bal.

9

mm

L/Bal.

7

mm

D.O.A.

19/4/8

D.O.I.

25/4/8

Survey held at

@ 10346m

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

14 Pk pass to Corhome

4/6 11 Pk 865001 Cabm Ah Heng (Red 2976.02, 317)

RECEIVED 08 JUN 2018

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

8/6 - typist

Days Of Repair:

5

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Survey Fee:

Transportation:

\$ + RS: \$

Photos

Others

TOTAL

Report Format:

SMART claim

Lump Sum / I.B.I. (\$)

6500/-



GBA6035G - AUTHORISED

Type

🔗 Question

Message

xs- \$900

Reply



GBA6035G - AUTHORISED

Type

🔔 Question

Message

Hi all, pls authorise to repair @ Lump Sum - \$6250

Reply



Service Request Details

Claim

S8M00ELE

Reference

None 

Loss Date

April 19, 2018

Request Date

April 24, 2018

Due Date

May 2, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (OD)

Type of Loss

Own Damage

Services

Accelerated workshop survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

GBA6035G

Make

TOYOTA

Service Address

176 Sin Ming Drive, , 575721

Primary Contact/Insured

OVF ENTERPRISE
49 JALAN PEMIMPIN, #05-08 APS INDUSTRIAL BUILDING, 577203, Singapore
86864848
wwtben@gmail.com

Claim Handler

HO Winnie
6568804833
winnie.ho@axa.com.sg

Additional Instructions

1) AUTHORISE LETTER FROM COMPANY, AUTHORISE DRIVER TO DRIVE & CLAIM UNDER POLICY 2)
DRIVER'S IC & DL... (expand)

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message



IA SUBMITTED FOR GBA 6035G

Type

🔗 Question

Message

Dear Sir/Madam, Please be informed that IA submitted. We have Not Authorize repair. Pending authorize letter from OI .Thanks Veron Chen

Reply

New Message

Type *



Message

Subject *

GBA 6035G-SUPPLEMENTARY

Message *

Dear Sir/Madam,

Please be informed that we have received supplementary of \$432.30 from repairer. Our surveyor had since checked and verified the supplementary parts and is of the view that the supplementary parts are consistent to the nature of the accident and is economical to repair.

Lump Sum \$6500/-before excess \$900 (incl.supplementary).Please refer to 2nd IA submitted. Thanks Veron Chen

Cancel

Send

Immediate Advice

To : AXA Insurance Pte Ltd

Survey details

Date of loss	19/4/2018
Date of appointment	25/4/2018
Date of survey	25/4/2018
Location of survey	GUAN MOTOR WORKS

Vehicle Details:

Claim Type:	OWN DAMAGE
Vehicle number	GBA 6035G
Make and Model	TOYOTA HIACE
Date of registration	17/9/2007
Excess	\$900
Market Value	\$35,000.00
Part Rebate	\$14,525.00
Nett Loss	\$20,475.00

Repair details

Initial Estimate	\$9,476.02 (incl.supplementary \$432.30)
------------------	--

Proposed/Revised repair cost:

Revised Estimate Amount	\$8,158.35 (incl.supplementary \$432.30)
"Check items (Estimated)	
Total Repair (Estimated)	\$8,158.35
Lump Sum(Estimated)	\$6,500.00

Number of days of repair	5 days (est)
--------------------------	--------------

Remarks:

The vehicle sustained damages at the fron portion.

Damages Consistent
Repair Cost Economical



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Survey details

Date of loss	19/4/2018
Date of appointment	25/4/2018
Date of survey	25/4/2018
Location of survey	GUAN MOTOR WORKS

Vehicle Details:

Claim Type:	Own Damage
Vehicle number	GBA 6035G
Make and Model	TOYOTA HIACE
Date of registration	17/9/2007
Excess	TBA
Market Value	\$35,000.00
Parf Rebate	\$14,525.00
Nett Loss	\$20,475.00

Repair details

Initial Estimate	\$9,043.72
------------------	------------

Proposed/Revised repair cost:

Revised Estimate Amount	\$4,383.46
"Check items (Estimated)	\$3,402.59
Total Repair (Estimated)	\$7,786.05
Lump Sum(Estimated)	\$6,250.00

Number of days of repair	5
--------------------------	---

Remarks:

The vehicle sustained damages at the front portion.

Damages Consistent
Repair Cost Economical

We have Not authorize repair.
Pending authorize letter from OI

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	19/04/2018 17:03
Date Of Accident	19/04/2018 09:30
Exact Location Of Accident	BRADDELL ROAD TO BISHAN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA6035G
Insured/Policyholder	
Name Of Registered Owner	OVF ENTERPRISE
Co Reg No	53059579J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63382501

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D (M)

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? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
------------------	--------------------

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P1653535
Cover Note Number	

Driver

Name of Driver	LEE CHUN SIONG
NRIC No	S7788544G
Date Of Birth	30/08/1977
Occupation	INDOOR
Date Of Driving Pass	19/07/2004
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91057053
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 339 UBI AVE 1
#07-881
Postcode 400339

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 - 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) 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

PLEASE REFER TO SKETCH PLAN.

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 GZ3184M
Vehicle Make/Model/Colour TOYOTA HIACE (VAN)
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver AYYAKKANNU MURUGAN
NRIC/Passport Number F8232682X
Contact Number 82643769
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

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.

B. 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.

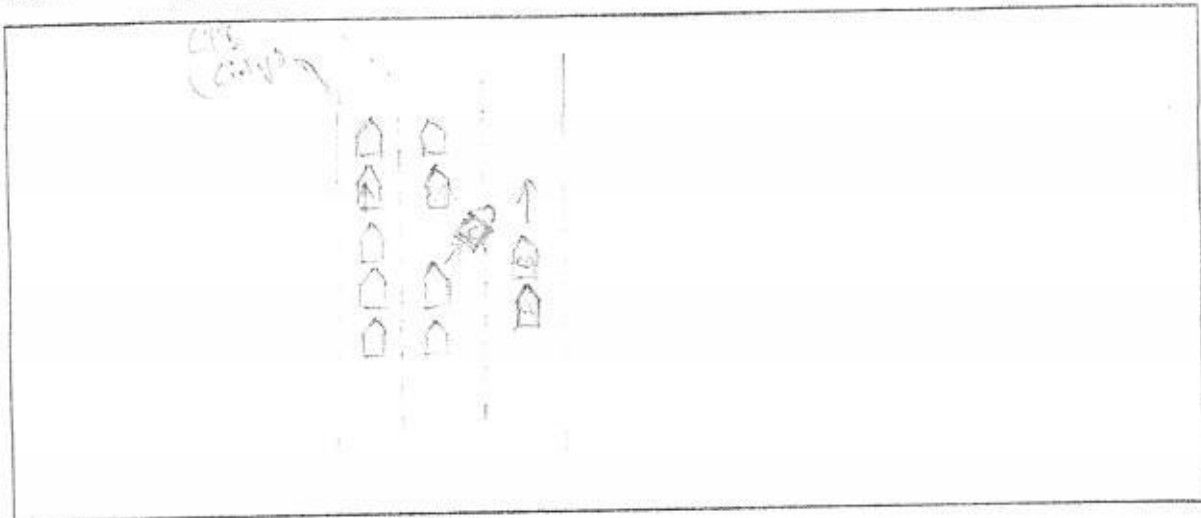
Policyholder's Signature
Date & Time

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

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

SKETCH PLAN

Date: 19-04-2018 Time: 9:30 Am Location: Braddell Road to Bishan
 My Vehicle A: G8A60356 Vehicle B: GZ318414 Vehicle C/Others: _____



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 19-04-18 9:30 Am I Was travelling along braddell Road to Bishan.
 A lorry suddenly change lane to ~~the~~ right. My front Van immediately brake to
 avoid chasing it. I did not in time and knocked the back front Van.
 The lorry in front did not stop and drive away towards braddell road to Bishan.
 (Not Injuries)

Repair at other workshop.

() Claim OD / TP at Ah Lim Motor () Claim OD / TP at other workshop () Reporting Only

Remarks: Please forward a copy of my efile accident report to

My workshop :

Email Address :

& Myself :

Email Address :

Note: Please take note that your insurer have **14 days timeframe** for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

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

Witnessed by Reporting Centre
 Personnel

19/4/18

4:15pm

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	9579J
Vehicle Details	
Vehicle No.:	GBA6035G
Vehicle to be Exported:	No
Intended De-registration Date:	26 Apr 2018
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	1KD1659786
Chassis No.:	JTFHT02P000005694
Maximum Power Output:	-
Open Market Value:	\$24,590.00
Original Registration Date:	17 Sep 2007
First Registration Date:	17 Sep 2007
Transfer Count:	1
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Jul 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$17,035.00
COE Rebate Amount:	\$14,525.00
Total Rebate Amount:	\$14,525.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 26 Apr 2018

OK

PUBLIC OF SINGAPORE
IDENTITY CARD NO. S7788544G



Name

LEE CHUN SIONG

李 駿 雄

Race

CHINESE

Date of birth

30-08-1977

Country/Place of birth

MALAYSIA

Sex

M



NRIC No. S7788544G



Nationality

MALAYSIAN

Date of issue

31-07-2013

APT BLK 33B UBI AVENUE 1 #07-881
SINGAPORE 400339

NRIC No: S7788544G

Date: 09/09/2014

930

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	19 Jul 2004
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	19 Jul 2004
Class 4A Omnibuses	23 Sep 2004



NP 428A

源摩哆廠 GUAN MOTOR WORKS

Business Regn. No: 081026001

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

REPAIR ESTIMATE FOR GBA6035G

Ref: 62564315

20-04-18

No.	Qty	List Items			
1	1	Front bumper	Bul/crm	\$ 547.23	✓
2	2	Front bumper side retainer	old air	\$ 220.46	X 116.23
3	1 set	Front bumper clips		\$ 30.00	✓
4	1	Front bumper inner reinforcement	my	\$ 407.20	✓
5	1	Front grille		\$ 408.00	✓
6	2	Headlamp	my	\$ 1,378.46	✓
7	1	Front bonnet		\$ 606.23	✓
8	1	Front bonnet "TOYOTA" logo		\$ 74.52	✓
9	1	Front bonnet lock		\$ 123.10	✓
10	1	Front support panel		\$ 405.20	✓
11	1	Front intercooler		\$ 1,794.20	✓
12	1	Waher tank		\$ 98.23	✓
13	1	Air con condenser		\$ 899.10	✓
14	1	Radiator		\$ 1,480.23	✓
15	1	Radiator spare tank	my	\$ 359.47	✓
				\$ 8,831.63	
			Less 25%	\$ 2,207.91	
			Total :	\$ 6,623.72	

Special Nett Items

16	1	Front number plate	\$ 50.00	25%
			Total :	\$ 50.00

Labour

1	Labour Charges for remove/refit and replace damage part:	\$ 1,000.00	-600
2	To putty and spray Spray Paintings charges.	\$ 1,000.00	450
3	To check wirings and lightings.	\$ 40.00	20
4	To remove, refit A/C condenser, radiator etc., including refill A/C gas.	\$ 150.00	100
5	To remove, refit front intercooler.	\$ 100.00	50
6	To supply and apply anti rust treatment	\$ 80.00	X
		Total :	\$ 2,370.00

Total Parts and Labour : \$ 9,043.72 9476.02

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:

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 08102600E

Attn Kenneth

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 Fax: 6453 8292 H/P: 9742 6003

27.04.2018

SUPPLEMENTARY REPAIR ESTIMATE FOR
TOYOTA HIACE - 3.0 D (M) - GBA 6035 G

2 pcs. Engine mounting LH/RH

CM \$ 416.40 ✓

Less 25% 104.10

\$ 312.30 \$ 312.30

1. Labour

120.00 *bol*

\$ 432.30


redefining / insurance

AXA INSURANCE SINGAPORE PTE LTD
 ☎ 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 - (65) 6338 2522
 🌐 www.axa.com.sg

Letter of Authorisation for Lump Sum Repair

1. I, [Name] [NRIC] _____, the owner of vehicle [no.] _____ ("Vehicle") do hereby authorize the [Workshop/Insurer] to repair the Vehicle on a lump sum basis instead of part by part.
2. The [Workshop/Insurer] has explained to me the difference between lump sum repair and part by part repair and the consequences of my authorisation for lump sum repair for the Vehicle.
3. I understand that with lump sum repair, the Workshop may use a mixture of genuine parts, original equipment manufacturer (OEM) parts, reconditioned and second hand parts to carry out the repair and I note that the [Workshop/Insurer] will not be furnishing a detailed breakdown of parts or price for such lump sum repair.
4. I am aware that AXA Insurance Singapore Pte Ltd ("AXA Insurance") does not encourage lump sum repair as AXA Insurance strongly recommends repairs for vehicles on a part by part basis for transparency reasons. I confirm that I will hold AXA Insurance harmless from any claims arising from the lump sum repair of the Vehicle which I have authorised.

Signed and acknowledged by:

Signature of policyholder

Date:



Name and Signature of workshop personnel including workshop stamp

Date:



OVF Enterprise

48, Jalan Perumahan, 808-08 APS Industrial Building

Tel: 63382601

Fax: 63362733

25-Apr-18

To Whom It May Concern,

RE: CERTIFICATION OF EMPLOYMENT BY EMPLOYER

This is to certify that Mr Lee Chun Siong , NRIC No. S7788544G is

employed as a Salesman since November 2015.

He is the driver for this vehicle GBA6035G.

Thank You.



OVF ENTERPRISE

源摩哆廠

GUAN MOTOR WORKS

Business Regn. No: 061026-00E

176 Sin Ming Drive #02-03 Sin Ming Autocare Singapore 575721 Tel: 6453 6111 H/P: 9742 6003

Meyers AXA Insurance Singapore Pte Ltd

Invoice No: 4886

8, Shenton Way, #27-01, AXA TowerSingapore 068811Date: 07-06-2018

TOYOTA HIACE - 3.0 D (M) - GBA 6035 G

Lump sum for total repair cost inclusive of spare parts
and labour charges.

Less EXCESS

S 6,500.00

900.00

S 5,600.00

Dollars Five thousand and Six hundred only.



E.&O.E.

SATISFACTION AND DISCHARGE VOUCHER

Vehicle Owner : OVF ENTERPRISE
Motor Policy No: P 1653535
Vehicle Reg. No : GBA 6035 G
Accident Date : 19-4-2018
Workshop : GUAN MOTOR WORKS

I/We certify that the vehicle has been fully repaired to my entire satisfaction and that the payment of the repairer's charges that are claimable under the policy will be deemed in full and final settlement of my claim.

Owner /insured Signature :



Name:

OVF ENTERPRISE

Date :

2-5-2018

CLAIMS

MESSAGES

SERVICE REQUESTS

Service Request Details

Claim	S8M00ELE	Vehicle Information	
Reference	CS/ASM18007563/Kvboss Date	Incident Vehicle	GBA6035G
Request Date	April 19, 2018	Registration #	TOYOTA 176 Sin
Due Date	April 24, 2018	Model	HIACE MANUAL
Vendor Name	April 24, 2019		Ming Drive, , 575721
Type of Loss	LKK AUTO CONSULTANTS PTE Loss LTD (OD)	Primary Contact/Insured	
Services	Own Damage	OVF ENTERPRISE 49 JALAN PEMIMPIN, #05-08 APS INDUSTRIAL BUILDING, 577203, Singapore 86864848 wwtben@gmail.com	

Actions

Next Step

Finish the work

Complete Work

More

SERVICE REQUESTS

MESSAGES

CLAIMS

Service Request Details

Claim	S8M00ELE	Vehicle Information	
Reference		Incident Vehicle	GBA6035G
CS/ASM18007563/Kvboss Date		Registration #	176 Sin
Request Date	April 19, 2018	Model	HIACE MANUAL
Due Date	April 24, 2018		Ming Drive, , 575721
Vendor Name	April 24, 2019	Primary Contact/Insured	
Type of Loss	LKK AUTO CONSULTANTS PTE LTD (OD)	OVF ENTERPRISE 49 JALAN PEMIMPIN, #05-08 APS INDUSTRIAL BUILDING, 577203, Singapore 86864848 wwtben@gmail.com	
Own Damage		Services	



SERVICE REQUESTS

MESSAGES

CLAIMS



Assessment Details

General & Workshop Details

Vehicle & Driver Details

Vehicle Condition

Taxes & Ratio

Parts & Labour

Miscellaneous

Summary

General Details

Involving

1 2007 TOYOTA HIACE MANUAL (GBA6035G)

Date of Loss

April 19, 2018

Time of Loss

0.00

Loss Description

GBA6035G (INSD) HIT GZ3184M (TP) REAR

Comment

Workshop Details

Total Rebate Amount

0

Nett Loss Amount

\$35,000.00

Assigned Workshop

LKK AUTO CONSULTANTS PTE LTD (OD)

Target Date of Completion *

05/02/2018



Days of work completion *

8



SERVICE REQUESTS

MESSAGES

CLAIMS

<< Assessment Details

General & Workshop Details

Vehicle & Driver Details

Vehicle Condition

Taxes & Ratio

Parts & Labour

Miscellaneous

Summary

Vehicle & Driver Details

Vehicle Registration#
GBA6035G

Purchase Date

mm/dd/yyyy



Registration State

SINGAPORE

Registration Date *

09/17/2007



Mileage

282976

Age of Vehicle

10

Driver Details

CATEGORY

Manufacturing Year

CATEGORY

Driver Name

POLICY INFORMAT... 2007

FNOL INFORMATI... LEE CHUN SIONG

ASSESSMENT INFO...

2007

POST SURVEY INF...

ASSESSMENT INFO... JTFHT02P000005694

CATEGORY Engine No

POLICY INFORMAT... 1KD1659786

ASSESSMENT INFO... 1KD1659786

CATEGORY Engine Capacity

POLICY INFORMAT...
ASSESSMENT INFO... 2982 cc

CATEGORY Sum Insured

POLICY INFORMAT... 0
ASSESSMENT INFO... 0

CATEGORY Market Value

POLICY INFORMAT... 0
ASSESSMENT INFO... 35000

FNOL INFORMATI... 0

POST SURVEY INF...

CATEGORY Driver License #

FNOL INFORMATI...
POST SURVEY INF...

CATEGORY License Type

FNOL INFORMATI...
POST SURVEY INF...

CATEGORY License Issue Date

FNOL INFORMATI...
POST SURVEY INF... mm/dd/yyyy

CATEGORY License Expiration Date

FNOL INFORMATI...
POST SURVEY INF... mm/dd/yyyy

CATEGORY Address

POST SURVEY INF...



SERVICE REQUESTS

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CLAIMS

English (default) ▾

LKK AUTO CONSULTANTS PTE LTD (OD) ▾



Assessment Details

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Summary

Front left side

BRIDGESTONE 9mm

Rear left side

BRIDGESTONE 7mm

Front right side

BRIDGESTONE 9mm

Rear right side

BRIDGESTONE 7mm

Assessment Details

General & Workshop Details Vehicle & Driver Details Vehicle Condition Taxes & Ratio Parts & Labour Miscellaneous

Summary

Tax Eligibility & Additional Deduction for Parts

Depr./Bttr%		Salvage%	
Discount%		Settlement%	100
25			
Paint Labour/Material Ratio			
Paint Labour Ratio		Paint Material Ratio	80
20			

Cash Loss
Yes No

Part Supplied by AXA

SERVICE REQUESTS MESSAGES CLAIMS

Assessment Details

General & Workshop Details			Vehicle & Driver Details		Vehicle Condition	Taxes & Ratio	Parts & Labour	Miscellaneous	Summary	Parts			
EDIT	SR NO	QUANTITY	MATERIAL	SIDE	PART NAME	PART NUMBER	REPAIR/REPLACE (PARTS)	CONDITION	LIST PRICE	DEPR/ BTTR%	DISC OUNT%	SALV AGE%	PART PRICE(NET)
	1	1			FRONT BUMPER			Buckled	547.23		25		410.42
	2	1			FRONT BUMPER SIDE RETAINER (O/S)			Damaged	110.23		25		82.67
	3	1			FRONT BUMPER SIDE RETAINER (N/S)			Serviceable	0		25		0
	4	1			SET FRONT BUMPER CLIPS			Necessary	30		25		22.5
	5	1			FRONT BUMPER INNER REINFORCEMENT			Bent	407.2		25		305.4
	6	1			FRONT GRILLE			Cracked	408		25		306
	7	2			HEADLAMP			Cracked	689.23		25		1033.85
	8	1			FRONT BONNET			Bent	806.23		25		454.67
	9	1			FRONT BONNET "TOYOTA" LOGO			Necessary	74.52		25		55.89
	10	1			FRONT BONNET LOCK			Damaged	123.1		25		92.33

SERVICE REQUESTS MESSAGES CLAIMS

<< Assessment Details

General & Workshop Details Vehicle & Driver Details Vehicle Condition Taxes & Ratio Parts & Labour Miscellaneous

Summary	EDIT	SR NO	NAME	ACTION	AMOUNT	COMMENT	REMOVE
		1	DAYS OF REPAIR	Reviewing	5		
		2	FRONT NUMBER PLATE	Reviewing	25	DENTED	
		3	ANTI RUST TREATMENT	Reviewing	0	NOT FITTED	

SERVICE REQUESTS

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CLAIMS



Assessment Details

General & Workshop Details	Vehicle & Driver Details	Vehicle Condition	Taxes & Ratio	Parts & Labour	Miscellaneous
Summary	Claim Amount	\$8,158.35	Claim Amount	\$8,158.35	

CATEGORY

ESTIMATE

REVISED AMOUNT

Labour

\$1,280.00

\$1,280.00

Miscellaneous

\$25.00

\$25.00

Submit for Review

SERVICE REQUESTS MESSAGES CLAIMS



Assessment Details

General & Workshop Details Vehicle & Driver Details Vehicle Condition Taxes & Ratio Parts & Labour Miscellaneous

Summary

Add

Approve

Deny

EDIT	SR NO	NAME	ACTION	AMOUNT	COMMENT	REMOVE
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☐		1	FINAL LUMP SUM	Reviewing	6500	
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SERVICE REQUESTS

MESSAGES

CLAIMS



Assessment Details

General & Workshop Details	Vehicle & Driver Details	Vehicle Condition	Taxes & Ratio	Parts & Labour	Miscellaneous
Summary	Claim Amount	\$5,600.00	Claim Amount	\$5,600.00	

CATEGORY

ESTIMATE

REVISED AMOUNT

Miscellaneous

\$6,500.00

\$6,500.00

Excess

-\$900.00

-\$900.00

Submit for Review