| urveyor: | X60 ASSIGNMENT (Office) |
|----------------------------------|------------------------------------------------------------------------------------------------|
| From (Person): | Fieuel Foo of MSIG Date/Fime: 08/05/18 |
| Estimated Cost | |
| _ | hicle No. STE 4839B Insured: STQ 4349K |
| at Workshop ir | als Atted Auto Services Tel. |
| of Blk Park 2 Policy No: | 505° 5035, Ang mo kio Ave 3, # 01 - 351, Ang mo kio Industri 5300000405QMX Claim No: 2/7488 |
| Sum Insured: | Excess: \$ 500.00 |
| Make of Veh: (Client's Record | D.O.A. 04/05/18 9/5/2018 11-30am Owner waiting. H.O.D. Entogenest: |
| | Person Contacted: Vehicle IN LOUT |
| Date/Time | Action/Instruction () Estimate |
| 11/5/18 | Send preli revised by merimen |
| | |

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

Attn: Fievel Foo Wenyao

Preliminary Advice

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Date: 11 May 2018

Insured Vehicle No : SJQ4349K : 04/05/2018 Accident Date : SJE4839B TP Vehicle No : 08/05/2018 Assignment Date : HYUNDAI 130 (FD) Make : 4.00 Est. Duration of Repair Date of Inspection : 09/05/2018 : ALFRED AUTO SERVICES & SUPPLIES (HQ) Inspection At BLK 5035, ANG MO KIO AVE 3, #01-351, ANG MO KIO INDUSTRIAL PARK 2 SINGAPORE 569538

Point of Impact / General Description of Damages

The vehicle sustained impact / damages front portion and parts claimed are consistent to the accident.

| Repairer's Estimate (Gross) | :S\$ | 7,828.00 |
|-----------------------------|------|----------|
| Revised Amount | :S\$ | 1,760.00 |
| Check Items (Estimated) | :S\$ | 2,610.00 |
| Total | :S\$ | 4,370.00 |
| Lump Sum Repair | :S\$ | |

Total Loss Consideration

| New for Old Value | :S\$ |
|--------------------|------|
| Pre-Accident Value | :S\$ |
| COE / PARF Rebate | :S\$ |
| Salvage Value | :S\$ |
| Margin for Repair | :S\$ |
| | |

Remarks

(X)

The vehicle is economical/not economical for repair.

The above survey was conducted on a 'without prejudice' basis.

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

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Authled | Status | |
|------------------------|---------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Main | 07 May 2018 | | 08 May 2018 16:12 Assign | | | | New Assignment Cancel Case | nt |
| TOURNAME | Main | F | teference | CI | aim Details | Doc | uments | Show All |
| CLAIM S | UBFOLDER DET | AILS | | and the same of th | miki ang Propinsi ang Paliki ang | | Control of the contro | Analys, Respect |
| Insured: | | ВАНА | RUM BIN SHARO | NI. ID: S169 | 5527H | L | Created by insur | er] |
| Main Clair | mant: | CITY | CAR, Co. Reg. N | 0.: 533353691 | | | | |
| Vehicle Reg. No.: | | SJE4 | 839B | D | ate of Loss: | 1 | 04/05/2018 22:00 - :59 [120 Months and 6 Days Fi Reg Date (Man Yr)] | |
| Claim Type: | | TP | | Po | olicy/Cover Note No. | : 0 | 1000314603 (Comprehensive) Coverage: 12/05/2017 - 11/05/2018 | |
| /ehicle Re | g. No. (Insured): | SJQ43 | SJQ4349K | | m to the contract of | | J300000405 QMX | |
| | | | | | Excess: | | \$\$500.00 | |
| Repairer: | | Alfred 56953 | Alfred Auto Services & Supplies (HQ) Blk 5035, Ang Mo Kio Ave 3, #01-351, Ang Mo Kio Industrial Park 2, 569538 Ang Mo Kio - Tel: 64834586/91454773 | | | | | |
| Handling I | nsurer: | | Insurance (Singa | | d. (HQ) - Tel: +65 6 | 5827 7888 [Ha | ndled by Flevel Foo | Wenyao - |
| lalmant's | Insurer: | THE R. O. LOW LLOW | | apore) Pte. Lte | d. (HQ) - Tel: +65 6 | 977 7000 | | |
| djuster: | | LKK A | uto Consultants | Pte Ltd (HO) - | Tel: 6256-3561 | Tmm Advise | due 00/05/2010 | , |
| river/Cus | stodian (Insured): | BAHAR | UM BIN SHARONI | (), NRIC: S16 | 596527H | IIIIII.Advice | ude 09/05/2018 | 1 |
| ldj Asg. R | emarks: | SURVE | Y AGREE ON SJE - | REQUEST LKK | TO SURVEY, CONTA | CT NO: 64834586 | / 91454773 | |
| SSOCIA | TED MAIL REC | EIVED | | | | VII | w All Compos | e Case Mail |
| here are | no mail for this ca | ise. | | | | | - Compos | e Case Maii |
| = | | | | | | | | |
| | OCIATED TASKS | 5 | | | View All Se | earch Tasks | Create New Task | Complete |
| Due Dat to results. | | Type Task | Group Subjec | t Handler | Assigned By | Completed | | |

11.30am Owner Waiting



| Date: 8 5 1 8 | 16 fil |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| To The Motor Claims Manager | |
| M/s MSIG Insurance Singapore 4 Shouton Way #21-01 8EX Contred | - 3 |
| 8EX Centre 2 | |
| Singapore 068867 | |
| Dear Sirs, | |
| ACCIDENT ON 4/5/18 20.00 8JE 4839 B AND 8JQ 4349 | INVOLVING VEHICLES NOS: |
| ALONG IAT BIK 822 Woodlands | stod Carpaire. |
| I/We, | of NRIC NO.: 53335369 J. |
| the sistered owner of motorcar no. 35 | FL229B I/We, hereby |
| amfare the registered owner of motorea no. | L (100 10 |
| au morised you to release all compensation mon | les pertaining to the accre and |
| at morised you to release all compensation mon directly to my repairer, M/s Alfred Auto Services | les pertaining to the accre and |
| ac morised you to release all compensation mon | es pertaining to the door and a services & Supplies to collect all |
| directly to my repairer, M/s Alfred Auto Services | es pertaining to the door and a services & Supplies to collect all |
| directly to my repairer, M/s Alfred Auto Services I/We, hereby authorise the said repairer, M/s Alfred compensation monies due to me from you or any | es pertaining to the door and a services & Supplies to collect all |
| I/We, hereby authorise the said repairer, M/s Alfred Services I/We, hereby authorise the said repairer, M/s Alfred Services Thank you. | es pertaining to the door and a services & Supplies to collect all |
| I/We, hereby authorise the said repairer, M/s Alfred Services I/We, hereby authorise the said repairer, M/s Alfred Services Thank you. | red Auto Services & Supplies to collect all other party, regarding the said accident. |
| I/We, hereby authorise the said repairer, M/s Alfred Services I/We, hereby authorise the said repairer, M/s Alfred Services I/We authorise the said repairer, M/s Alfred Services I/We authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by authorise the said repairer, M/s Alfred Services I/We are by a said repairer and the said repairer are by a said repairer and the said repairer are by a said repairer and the said repairer are by a said repairer and the said repairer are by a said repairer and the said repairer are by a said repairer and the said repairer are by a said repairer | red Auto Services & Supplies to collect all other party, regarding the said accident. Signature |

Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars Owner ID Type: | Business | |
|------------------------------------------|--------------------------------------------------------------------|-----|
| Owner ID: | 5369J | |
| Vehicle Details | 53893 | 196 |
| Vehicle No.: | SJE4839B | |
| Vehicle to be Exported: | No | |
| Intended De-registration Date: | 10 May 2018 | |
| Vehicle Make: | HYUNDAI | |
| Vehicle Model: | 130 (FD) 1.6 DOHC AUTO | |
| Primary Colour: | Grey | |
| Manufacturing Year: | 2008 | |
| Engine No.: | G4FC8U412046 | |
| Chassis No.: | KMHDC51DR9U094438 | |
| Maximum Power Output: | 89.7 kW (120 bhp) | |
| Open Market Value: | \$15,785.00 | |
| Original Registration Date: | 28 Apr 2008 | |
| First Registration Date: | 28 Apr 2008 | |
| Transfer Count: | 4 | |
| Actual ARF Paid: | \$15,785.00 | |
| Intended PARF Rebate Details | | Ġ |
| PARF Eligibility: | Forfeited | |
| PARF Eligibility Expiry Date: | | |
| PARF Rebate Amount: | \$0.00 | |
| Intended COE Rebate Details | 1612 6 1913 开始的时间 1913 1915 19 19 19 19 19 19 19 19 19 19 19 19 19 | |
| COE Expiry Date: | 27 Apr 2028 | |
| COE Category: | A - Car (1600cc & below) | |
| COE Period(Years): | 10 | |
| PQP Paid: | \$38,655.00 | |
| COE Rebate Amount: | \$38,515.00 | |
| Total Rebate Amount: | \$38,515.00 | |

The information contained herein is correct as at 10 May 2018

ОК

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 witholding 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.

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

| ACC | DENT | CTAT | EΜ | EMI |
|-----|------|------|-----|-----|
| ACC | | 3 | 7.7 | |

Date Of Report

07/05/2018 11:04

Date Of Accident

04/05/2018 20:00

Exact Location Of Accident

BLK 822 WOODLANDS ST 82 CARPARK

SINGAPORE

Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJE4839B

Insured/Policyholder

Name Of Registered Owner

CITY CAR

Co Reg No.#

53335369J

Email Address

ASBK86@HOTMAIL.COM

Mobile Phone No

Alternative Phone No

OFFICE-96866877

Vehicle Particulars

Manufacturer

HYUNDAI

Model

130

Exact Purpose for which vehicle was being used at WORK PURPOSE

time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

5100236249

Cover Note Number

Driver

Name of Driver

SOH BENG KEONG, ALVIN

NRIC No

S8615815I

Date Of Birth

17/06/1986

Occupation

INDOOR

Date Of Driving Pass

23/11/2007

Driving Experience

10 YEARS AND 5 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-96866877

Fax Number

Contact Number

EMail Address

ASBK86@HOTMAIL.COM

Page 1 of 14

Address

BLK 822 WOODLANDS ST 82 #05-439

SINGAPORE

Postcode

730822

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

DRIZZLING

Road Surface

WET

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?

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)

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?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJQ4349K

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category

BAHARUM BIN SHARONI

Name of Driver

Contact Number

NRIC/Passport Number

91779001

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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.
- 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 ;
 - 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:
 - 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 Dato & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Sketch Plan #2 Pg. 1

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| SCRIBE CIRCUMSTANCES OF | THE ACCIDENT | | | |
| MKI Car fully | Stop and | the ve | hicle 5 | JQ4349K |
| The car is the | | —————————————————————————————————————— | Г | |
| everse and ba | ing an m | y front | area ot | my car |
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| the description profession and the second | pliars trattue in every to | espect. | | Sour |
| I/We declare the foregoing party | Driver's Signatur | e | | entre Personne 's Signature |
| I/We declare the foregoing part | Driver's Signatur (if driver is not ti | e | Reporting Co | |

ASSESS SUMMERS OF COLUMN



ALFRED AUTO

Services & Supplies

Bik 5035 Ang Mo Kio Ave 3 # 01-351 Industrial Park 2 Singapore 569538 Tel: 6483 4586 Fax: 6463 4882 Reg. No. 391089/00-E Email: alfredauto@hotmail.com



Reference No: 70518

Date: 07.05.2018

City Car

Blk. 822 Woodlands St. 82 #05-439

Singapore 730822.

Hyundai i30.

Estimated Repair Cost for Vehicle Reg. No: SJE 4839 B

REPLACEMENT OF DAMAGED PANELS / PARTS

| 1 Pc. Front Bonnet & Par | 540.00 ⊀ |
|-------------------------------------------------|-----------------------|
| 2 Pcs. Front Head Lamp @ 499.00 R. months orall | 998.00 — |
| 1 Pc. Front Grille A >VC | 489.00 ⊀ |
| 1 Pc. Front Logo ASVV | 115.00 🗡 |
| 1 Pc. Front Bumper / PC | 890.00 - 536.50 |
| 10 Pcs. Front Bumper Clips / @ 4.00 MC | 40.00 — |
| 1 Pc. Front Bumper Grille X MM | 425.00 🖈 |
| 1 Pc Front Bumper Reinforcement . 7+ | 638.00 - 238.00 |
| 2 Pcs. Front Bumper Side Catch @ 95.00 7 SVL | 190.00 × |
| 2 Pcs. Bonnet Stopper 🗶 @ 25.00 | 50.00 × (811.50) |
| | 175.00 × 207, 1449.20 |
| 1 Pc. Bonnet Lock X 1 Pc. Front Support Panel X | 920.00 ≠ |
| 1 Bottle. Coolant X | 98.00 Nett. 火 |

Total (Panels / Parts):

5,568.00 (SGD)

LABOR CHARGES

| To check wiring | 100.00 | 30 |
|-----------------------------------------------------------------------|--------|------|
| To remove & refit Aircon Condenser, check & Top-up oil & gas. | 180.00 | & HH |
| To knocking, straightening repair & renew all Accident affected area. | 900.00 | 400 |
| To respray painting on all affected area. | 900.00 | 400 |

Page 1 of 2

8301



ALFRED AUTO

Services & Supplies

Blk 5035 Ang Mo Kio Ave 3 # 01-351 Industrial Park 2 Singapore 569538 Tel: 6483 4586 Fax: 6483 4882 Reg. No. 391089/00-E Email: alfredauto@hotmail.com



To rustproof all accident damage affected area.

180.00

Total (Labor Charges):

2,260.00 (SGD)

TOTAL COST SUMMARY

PANELS / PARTS LABOR CHARGES 5.568.00

2,260.00

1/51800/-4 days

Grand Total:

7,828.00 (SGD)

Upsum Mepar. Six.
After repair photos.
Guo Quy - 82880282 99/5/18

> 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 frem Insurance Company

Acknowledged by Repairer

Signature:

Date:

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/MSG18008454/GVBN2

Date:

19/07/2018

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

1000314603

Claimant Vehicle No:

SJE4839B

Insured Vehicle No:

SJQ4349K

Date of Loss:

04/05/2018

Nature of Claim:

TP

Claim No: 217488

KMHDC51DR9U094438

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

SJE4839B

Make & Model:

HYUNDAI 130 (FD), 1.6 DOHC (A) 28/04/2008 (Man. Year: 2008)

Engine No: Chassis No: Odometer:

G4FC8U412046

184826 km

Reg. Date: Colour:

Grey

1591 cc

Engine Capacity: Market Value/New Car

Price:

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:

Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: Front Left Side: 215/40R17

Rear Tyre Size:

215/40R17

Front Right Side:

Continental 6 mm Continental 6 mm Rear Left Side: Rear Right Side: Continental 6 mm Continental 6 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS Parts Miscellaneous Items | Repairer's 5,568.00 0.00 | Adjuster's 1,449.20 0.00 | Difference 4,118.80 0.00 | Diff % 73.97 |
|--------------------------------------------------------|--------------------------------|--------------------------------|---------------------------------------|-----------------|
| Labour Paintwork Labour | 2,260.00 0.00 0.00 | 830.00 0.00 0.00 | 1,430.00 0.00 0.00 | 63.27 |
| Towing Calculated Gross Total (S\$) | 7,828.00 | 2,279.20 | 5,548.80 | 70.88 |
| Approved Total (Overridden) (S\$) Nett Amount (S\$) | 7,828.00 | 1,800.00 | 6,028.00 | 77.01 |

INSPECTION

Date of Assignment:

08/05/2018

Date Inspected:

09/05/2018 Inspected At:

Alfred Auto Services & Supplies (HQ) Blk 5035, Ang Mo Kio Ave 3, #01-351,

Ang Mo Kio Industrial Park 2

Singapore 569538

Estimated Period of Repair:

4.0 days

Adjuster: XING GUO QIANG

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

Version: 1.0 (Last Synchronised: 19 Jul 2018) Part Source: MRM-SG

HYUNDAI I30 (FD) 1.6 DOHC (A) (Catalogue:Merimen Singapore 1.0) Parts: 144

(Price-denominated Standard List) Repairer's Labour:

Print Code: (Unsubmitted, no print-code for SJE4839B)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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 *.

| No. | Qty | Part No. | Particulars | Condition | Repairer's | Amount |
|-----|--------------|--------------|--------------------------------------------------|----------------------------|----------------------|-------------------------|
| 1 | 1 | | *FRONT BONNET | Repair | 540.00 F | *-FL |
| 2 | 2 | | *FRONT HEAD LAMP | Mounting Cracked | 998.00 F | *998.00 FL |
| 3 | 1 | | *FRONT GRILLE *FRONT LOGO | Serviceable Serviceable | 489.00 F 115.00 F | *-FL *-FL |
| 5 | 1 | | *FRONT BUMPER *FRONT BUMPER CLIPS | Deformed Necessary | 890.00 F 40.00 F | *535.50 FL *40.00 FL |
| 7 | 1 | | *FRONT BUMPER GRILLE *FRONT BUMPER REINFORCEMENT | Not Necessary Bent | 425.00 F 638.00 F | *-FL |
| 9 | 2 | | *FRONT BUMPER SIDE CATCH | Serviceable | 190.00 F | *- FL |
| 10 | 2 | | *BONNET STOPPER | Not Necessary | 50.00 F | *- FL |
| 11 | 1 | | *BONNET LOCK | Not Necessary | 175.00 F | *-FI |
| 12 | 1 | | *FRONT SUPPORT PANEL | Not Necessary | 920.00 F | *-FI |
| 13 | 1 anchise | part. S=SpcN | *BOTTLE COOLANT lett. L=ListItemDisc. | Not Necessary | 98.00 FS | *- F8 |
| | | | | Sub Total (S\$) | 5,568.00 | 1,811.50 |
| | | | - List Item Discount on | L Items 0.00/20.00% (S\$) | 0.00 | 362.30 |
| | | | | Total Parts (S\$) | 5,568.00 | 1,449.20 |

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

| No | Particulars | Lab.Type | Repairer's | Amount |
|------|----------------------------------------------------------------------|-------------------|-----------------------|--------|
| Labo | our Items | | | |
| 1 | TO CHECK WIRING | New | 100.00 | 30.00 |
| 2 | TO REMOVE & REFIT AIRCON CONDENSER, CHECK & TOP-UP OIL & GAS | New | 180.00 | • |
| 3 | TO KNOCKING, STRAIGHTENING REPAIR & RENEW ALL ACCIDENT AFFECTED AREA | New | 900.00 | 400.00 |
| 4 | TO RESPRAY PAINTING ON ALL AFFECTED AREA | New | 900.00 | 400.00 |
| 5 | TO RUSTPROOF ALL ACCIDENT DAMAGE AFFECTED AREA | New | 180.00 | |
| | Gross Labour Cost (S\$) | | 2,260.00 | 830.00 |
| | Report was unsubmitted duri | ng this print-out | STATE OF THE PARTY OF | |

< END OF ESTIMATES >