

U.S. CASE OWNER:

CC<sup>3</sup> / TP 1800 8860 / 192a3n2LKK:  
IDAC:

Surveyor:

Amk

DOI:

ASSIGNMENT

14/5/18

Date / Time:

14/5/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Claim No.:

Name of Insured:

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A:

11-518

Place of Accident:

Is driver the owner? ( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No.:

(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Premium

INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date/ Time

14/5

He Burg X: XF3416 X

\* To be directed claim to the insurers of Goldbell. Car driven during test drive.

LPI INSTRUCTED TO REJECT TP CLAIM AND REDIRECT TO GOLDBELL.

6-7-18 WSP EMAIL TO PURCHASE REPORT.

RECEIVED 17 JUL 2018

135

50+50

29

80

314

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:

Confirm with:

Confirm by:

Repair Cost:

SS

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No.:

If NO or B 28, Ass. Lia:

Repair Cost:

SS

Loss of Rental (LOR):

SS

(

days)

Loss of Use (LOU):

SS

(\$

x

days)

Loss of Income (LOI):

SS

(\$

x

days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

SS

Medical:

SS

Disbursement:

SS

(e.g. Tow/ Independent)

Legal Cost

SS

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

SS

Global Sum SS:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

Name 1:

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:





# 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				
LONPAC INSURANCE BHD		Ref : CC3/LPC18008860/K1ea3		
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 15-05-2018		
		Code : LPC2		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	XE 341E	Veh. Inspected	SHC 6212E	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	15/05/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
<b>4. Description of Damages</b>				
<b>5. General Information</b>				
Accident Date	11/05/2018	Inspection Date	14/05/2018	
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

**Mei Kwan (LKKAUTO)**

---

**From:** GERALD POH WEE BIN <geraldpoh@lonpac.com>  
**Sent:** Wednesday, 16 May, 2018 9:50 AM  
**To:** Mei Kwan (LKKAUTO)  
**Cc:** MT\_Claim\_SG  
**Subject:** RE: Direct Settlement - Accident Involving XE341E (OI : LPC - TBA) AND SHC6212E (TP : LKK REF - CC3/LPC18008860/K1ea3) on 11.05.2018  
**Attachments:** 16052018094028.pdf

Our Ref : TBA

Dear Mei Kwan,

We attached a copy of email from our insured dated 15 May 2018.

We are insuring X341E but at the time of the accident, we understand that the vehicle was driven by the staff from Gold Bell Engineering Pte Ltd during the test drive.

Please re-direct the claim to the insurers of Gold Bell Engineering Pte Ltd as we are not liable for the damage to SHC6212E.

Best Regards  
Gerald Poh  
Senior Claims Executive | Lonpac Insurance Bhd  
300 Beach Road, #17-04/07 The Concourse, Singapore 199555  
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

---

**From:** Mei Kwan (LKKAUTO) [mailto:Meikwan@lkkauto.com]  
**Sent:** Wednesday, 16 May, 2018 9:22 AM  
**To:** MT\_Claim\_SG  
**Cc:** GERALD POH WEE BIN; ONG LI LI; ERIC WOO JUN KIAT; Asher Sng (LKKAUTO); Joy Irene (LKKAUTO); Admin A  
**Subject:** Direct Settlement - Accident Involving XE341E (OI : LPC - TBA) AND SHC6212E (TP : LKK REF - CC3/LPC18008860/K1ea3) on 11.05.2018

**WITHOUT PREJUDICE**

Dear Sir / Madam,

We refer to the above matter.

This is a TP direct settlement case.

We had inspected TP vehicle SHC 6212E at M/s Premier Automotive Services Pte Ltd – Changi.

Enclosed for your perusal is:

- TP GIA report
- Estimated cost of repair
- Preliminary advice

GERALD POH WEE BIN

---

From: PEK POH HONG [pekpoh\_hong@hotmail.com]  
Sent: Tuesday, 15 May, 2018 10:16 AM  
To: GERALD POH WEE BIN  
Subject: FW: Primer Mover Reg No XE 341E (Accident Reporting)  
Attachments: image001.jpg

Dear Gerald,

Kindly advise.

Thank you.

Best Regards.

Miss Yeo  
Sing Chew Insurance Agency Pte Ltd

---

From: Desmond Bok [desmond.bokck@hiapseng.com]  
Sent: Tuesday, May 15, 2018 2:12 AM  
To: 'PEK POH HONG'  
Cc: [belindakoh@hiapseng.com](mailto:belindakoh@hiapseng.com); 'Choong Yiu Gei'  
Subject: Primer Mover Reg No XE 341E (Accident Reporting)

Dear M/s Yeo,  
The above mentioned Primer mover is covered under LONPAC INSURANCE BHD .

Last Friday on 11/5/18, We sent the above mentioned vehicle in the morning to Gold Bell Engineering Pte Ltd for servicing. We were informed in the afternoon by Gold Bell Engineering Pte Ltd that while test driving our above mentioned outside, they had an accident. Gold Bell Service Advisor said that they will take responsibility for the accident and will do the necessary insurance reporting under Gold Bell Engineering Pte Ltd.

As per my tele -reporting for this accident on 11/5/18, you have requested for this email to be sent to you.

Thanks & Regards,  
Desmond Bok  
Assistant Manager  
Mechanical/ Electrical Department  
[cid:image001.jpg@01D3EB96.E8E2B630]  
Hiap Seng Engineering Limited  
28 Tuas Crescent  
Singapore 638719  
Tel : 6862 1144 Ext 305  
Grid Phone No: 9080 5692

**Asher Sng (LKKAUTO)**

---

**From:** Asher Sng (LKKAUTO)  
**Sent:** Thursday, 24 May 2018 5:41 PM  
**To:** Gary Shi; AccReport  
**Cc:** Admin A; Joy Irene (LKKAUTO)  
**Subject:** Your Ref: SHC 6212E, ACCIDENT INVOLVING SHC 6212E AND XE 341E ON 11/05/2018.  
**Attachments:** 16052018094028.pdf

**WITHOUT PREJUDICE**

Your Ref: SHC 6212E  
Our Ref: CC3/LPC18008860/K1ea3

Hi Gary,

We refer to the above matter.

ACCIDENT INVOLVING SHC 6212E AND XE 341E ON 11/05/2018.

Enclosed a copy of the letter from insured.

Please be informed that our Principal not able to look into the claim due to the vehicle was drive by the service advisor during the time of accident.

Therefore, we will close the matter at our end.

Kindly redirect your client's claim to GOLDBELL ENGINEERING PTE LTD.

Thank You.

Best Regards,

**Asher Sng** | Case Handler

**LKK Auto Consultants Pte Ltd**

phone: 6841-6051 | email: [ashersng@lkkauto.com](mailto:ashersng@lkkauto.com) | fax: 6741-4108

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

## Asher Sng (LKKAuto)

---

**From:** Gary Shi <gary.shi@premiertaxi.com>  
**Sent:** Friday, 6 July 2018 8:57 AM  
**To:** Asher Sng (LKKAuto)  
**Cc:** Shafawati  
**Subject:** FW: YOUR REF: SHC6212E/GC, OUR REF: D18/3903M/PTE ACC ON 11.05.18 INVOLVING SHC6212E & XD341E ALONG PENJURU ROAD / JALAN BURUH

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

Dear Asher,

We would like to purchase the survey report from LKK Auto.

Regards

Gary Shi  
Senior Executive, Claims  
Premier Automotive Services Pte Ltd

Address: 23 Changi South Ave 2, #01-02 Singapore 486443  
Tel: 6214 8880 Ext 069 | DID: 6544 6671 | Fax: 6214 1511  
Visit us at: [www.premiertaxi.com.sg](http://www.premiertaxi.com.sg)

Confidentiality Notice | This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential or proprietary information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, immediately contact the sender by reply e-mail and destroy all copies of the original message.

 Please Consider Your Environmental Responsibility Before Printing This E-mail. SAVE OUR TREES and REDUCE POLLUTION 

**From:** May Chua Hui Chin [mailto:maychua@msfirstcapital.com.sg]  
**Sent:** Thursday, 5 July, 2018 4:00 PM  
**To:** Gary Shi  
**Subject:** YOUR REF: SHC6212E/GC, OUR REF: D18/3903M/PTE ACC ON 11.05.18 INVOLVING SHC6212E & XD341E ALONG PENJURU ROAD / JALAN BURUH

**YOUR REF:** SHC6212E/GC  
**OUR REF:** D18/3903M/PTE

Dear Mr. Gary,

We refer to the above mention.

May we request a copy of the Survey report  
Thank you

May Chua  
Motor Claim Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | DID : 6507 3859 | Fax No. : 6507 3849  
| Email: [maychua@msfirstcapital.com.sg](mailto:maychua@msfirstcapital.com.sg) | Company Regn. No. 195000106C  
A Member of **MS&AD** Insurance Group

• Personal Data Protection Act 2012 ("PDPA"):

Under the PDPA, there are various requirements that regulate the processing of your personal data. Please refer to <http://www.msfirstcapital.com.sg> for details of PDPA Personal Data Collection Statement.

Confidentiality Notice: This e-mail is confidential. It may also be legally privileged. If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it. If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.



## 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	11/05/2018 15:30
Date Of Accident	11/05/2018 11:30
Exact Location Of Accident	PENJURU ROAD // JALAN BUROH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6212E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

### Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

### Driver

Name of Driver	NEO BEE HOON
NRIC No	S0057576C
Date Of Birth	17/02/1950
Occupation	OUTDOOR
Date Of Driving Pass	19/10/1989
Driving Experience	28 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98304921
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 143 #10-416 TAMPINES ST 12
Postcode	520143
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	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)	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

BOTH VEHICLES - NO PAX

#### 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	XE341E
Vehicle Make/Model/Colour	TRUCK
Details Of Properties	VEH/ B
Vehicle Category	GOODS VEHICLE
Name of Driver	CHONG MIN SENG
NRIC/Passport Number	S7883052B
Contact Number	97290783
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	RAILINGS
-----------------------------	----------

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

GOVERNMENT

Name of Driver

RAILINGS - DAMAGED

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name

NEO BEE HOON - DRIVER OF VEH. A

Approximate Age

Injuries Sustain

FELT SOME DISCOMFORT & WILL SEEK FOR MEDICAL TREATMENT  
SOON

Injured person in which vehicle?

SHC6212E

Were seat belts worn?

YES

Was this injured conveyed to hospital by  
ambulance?

NO

Address

Postcode

**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.

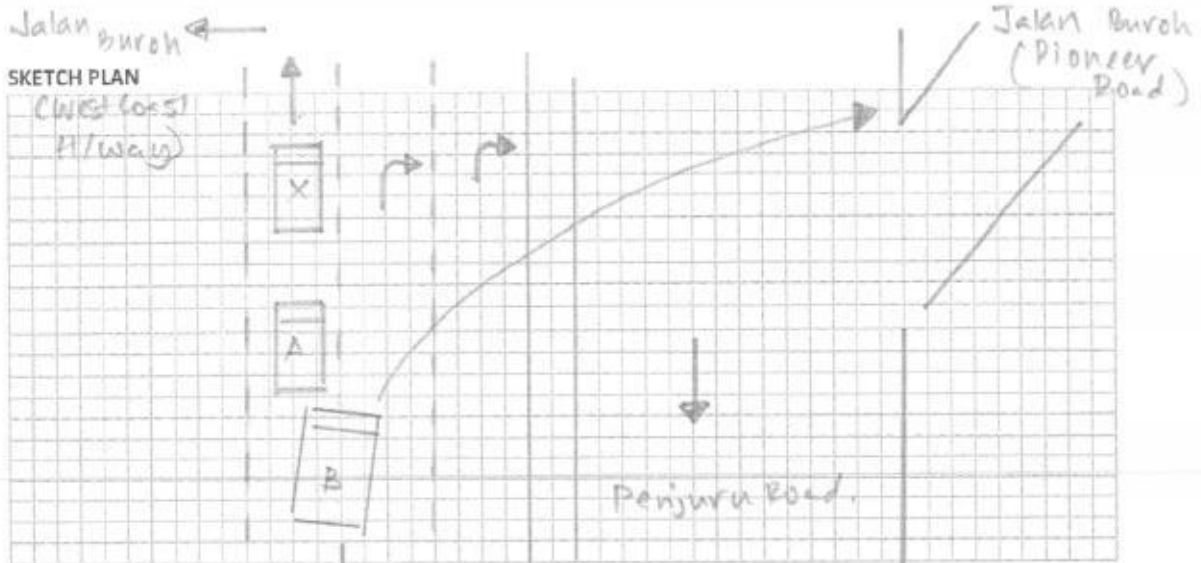


Policyholder's Signature  
Date & Time:

11 MAY 2018  
v/pulver 50057576/C  
Driver's Signature SHC 6212 E  
(If driver is not the policyholder)  
Date & Time:

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

## Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A = SHC6212-E

B.  $\times E \quad 341E$

\* AS ATTACHED STATEMENT.

## 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.:

11 MAY 2018

Describe Circumstance of the Accident.

ON 11/05/2018 @ 1130HRS, I WAS DRIVING MY TAXI ( SHC 6212 E )  
TRAVELLING ALONG PENJURU ROAD AT THE TRAFFIC LIGHT JUNCTION OF JALAN  
BUROH (PIONEER ROAD & WEST COST H/WAY) IN LANE 3.

I STOPPED MY TAXI AS VEHICLES AHEAD OF ME STOPPED – DUE TO RED TRAFFIC  
LIGHT.

WHILE STATIONARY FOR ALMOST A MINUTE, SUDDENLY I FELT AN IMPACT FROM  
THE REAR.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B ( XE 341 E – TRUCK )  
WHICH WAS APPROACHING FROM THE REAR, FAILED TO STOP IN TIME – HAD  
COLLIDED ONTO THE REAR RIGHT OF MY TAXI, IMPACT FORCED VEHICLE B – TO  
SWERVE TO THE RIGHT & HIT ONTO THE GREEN RAILINGS BEFORE STOPPING INTO  
OPPOSITE DIRECTIONS LANE.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE REAR & REAR RIGHT  
PORTION. VEHICLE B HAD DAMAGES ON THE FRONT LEFT PORTION.

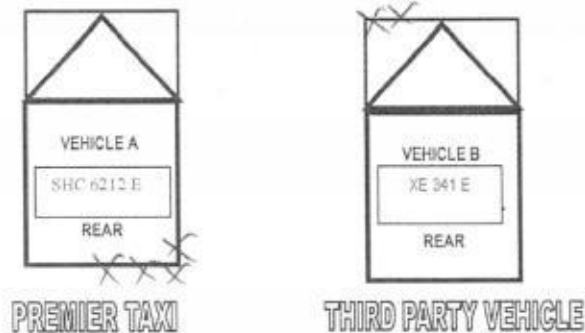
\* RAILINGS DAMAGED AS WELL

AS A RESULT, I FELT SOME DISCOMFORT AND SHOCKED, WILL SEEK FOR MEDICAL  
TREATMENT SOON. NO AMBULANCE AT SCENE.

NO PASSENGERS ONBOARD BOTH VEHICLES.

\*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B



Driver's Signature & NRIC Number  
@ 3:43:23 PM

( attended by )

Text size +

**Enquire Transaction History****Transaction History Details**

Log Date/Time:	03 Oct 2014 / 09:07:11	Receipt No.:	AACCK001-AX239-141003-000007
Asset Type:	Vehicle	Transaction Amount:	\$63,304.00
Asset ID:	SHC6212E	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20141003090711276360		
Vehicle No.:	SHC6212E		
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-		
Vehicle Attachment 3:	-		
Vehicle Scheme:	Taxi (Company)		
First Registration Date:	03 Oct 2014		
Original Registration Date:	03 Oct 2014		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414ME5468961		
Engine No.:	D4FDDH309756		
Motor No.:	-		
Trailer Chassis No.:	-		
Propellant:	Diesel		
Passenger Capacity:	4		
Engine Capacity:	1685		
Power Rating:	-		
Unladen Weight:	1584		
Maximum Laden Weight:	2050		
Primary Color:	Silver		
Secondary Color:	-		
Manufacturing Year:	2013		
Open Market Value:	\$19,726.00		
Minimum PARF Benefit:	\$7,335.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	03 Oct 2014 09:07:11		
COE No.:	2014100301001153G		
COE Expiry Date:	02 Oct 2022		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$50,938.00		
Lifespan Expiry Date:	02 Oct 2022		
Owner ID Type:	Company		

# PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02  
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511  
CO. REG:200707743D GST REG:200707743D

14-May-18

## ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6212 E

1 pc	Bootlid cRdi	\$	29.00
1 pc	Bootlid lower garnish	\$	290.00
1 pc	Rear bumper	\$	696.00
1 pc	Rear bumper lower cover	\$	206.00
2 pcs	Rear bumper side bracket o/s & n/s @ \$29.00 ?	\$	58.00
1 pc	Rear bumper inner sponge	\$	114.00
1 pc	Rear bumper reinforcement ?	\$	607.00
2 pcs	Rear bumper stay o/s & n/s @ \$53.00 ?	\$	106.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00 ?	\$	36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00 ?	\$	36.00
1 pc	Rear bumper o/s reflector @ \$46.00 X	\$	46.00
		\$	2,224.00
		Less 10%	\$ 222.40
		\$	2,001.60

### S/NETT

1 set	Bootlid lower garnish clips	\$	60.00
1 set	Rear bumper clips	\$	48.00
1 set	Reverse sensor	\$	<del>280.00</del> 200
1 set	Bootlid stickers	\$	100.00
Sundry		\$	<del>50.00</del> 20
Towing Fee		\$	50.00
To dismantle / replace/test reverse sensor to new bumper and reset to the same		\$	<del>120.00</del> 20
To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.		\$	<del>180.00</del> X
To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the bootlid lower garnish etc		\$	<del>750.00</del> 500
To putty and spray painting on rear bumper, bootlid lower garnish, bootlid		\$	<del>600.00</del> 500
To apply rustproofing on the repaired and replaced panels.		\$	<del>150.00</del> X
		\$	4,389.60

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 is allowed
- Supplemental items must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Date:

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

Kahin (Mk)  
1x/5 pc 10000  
3 Rep.  
45 After Repair ph



# PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02  
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511  
CO. REG:200707743D GST REG:200707743D

14-May-18

## ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6212 E

1 pc	Bootlid cRdi		\$	29.00
1 pc	Bootlid lower garnish		\$	290.00
1 pc	Rear bumper		\$	696.00
1 pc	Rear bumper lower cover		\$	206.00
2 pcs	Rear bumper side bracket o/s & n/s @ \$29.00		\$	58.00
1 pc	Rear bumper inner sponge		\$	114.00
1 pc	Rear bumper reinforcement		\$	607.00
2 pcs	Rear bumper stay o/s & n/s @ \$53.00		\$	106.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00		\$	36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00		\$	36.00
1 pc	Rear bumper o/s reflector @ \$46.00		\$	46.00
				\$ 2,224.00
Less 10%				\$ 222.40
				\$ 2,001.60

### S/NETT

1 set	Bootlid lower garnish clips		\$	60.00
1 set	Rear bumper clips		\$	48.00
1 set	Reverse sensor		\$	<del>280.00</del> 200
1 set	Bootlid stickers		\$	100.00
Sundry				\$ <del>50.00</del> 20
Towing Fee				\$ 50.00
To dismantle / replace/test reverse sensor to new bumper and reset to the same				\$ <del>120.00</del> 20
To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.				\$ <del>180.00</del> 20
To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the bootlid lower garnish etc				\$ <del>750.00</del> 500
To putty and spray painting on rear bumper, bootlid lower garnish, bootlid				\$ <del>600.00</del> 500
To apply rustproofing on the repaired and replaced panels.				\$ <del>150.00</del> 100
				\$ 4,389.60

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 is allowed
- Supplemental items must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by repairer

Date:

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.

4/6/18  
actual 45 \$2750/3 Rps

Kahin (11/11/18)  
1x/5/18 1000  
3 Rps  
45 \$2750/3 Rps

CASH SALE/WORK ORDER No:AD 8284



PEOPLE'S VEHICLE SERVICE PTE LTD

BLK 3023A, UBI ROAD 1 #01-60, SINGAPORE 408717

TEL : 6743 1987 ( 3 LINES ) FAX : 6743 0013

Reg No: 200415052W

Date, 11/5/18

寶號

Messrs:

車號

Vehicle No:

由

From:

到

To:

其他

Remark:

時間

Time:

13:25:14:00-14:58

AMOUNT: \$

注意 本公司對所拖之車輛，在進行中如有任何損失或破壞，一概由車主自行負責。

NOTE: Vehicle is towed at owner's risk. The company accepts no responsibility for damages or other misdemeanour to your vehicle whilst being towed

經手人

Authorised by:

W567

收貨人

Received by:

G




## 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				
PREMIER AUTOMOTIVE SERVICES PTE LTD		Ref : CC3/TP18008860/K1ea3n2		
23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443		Date : 20-07-2018		
		Code : TP451		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.		Veh. Inspected	SHC 6212E	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	14/05/2018	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	KIA OPTIMA	c.c	1685	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	KNAGM414ME5468961	Colour	SILVER	
Odometer	455019	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	205/65 R16	MAXXIS	7 mm	
L/H Front Tyre	205/65 R16	MAXXIS	7 mm	
R/H Rear Tyre	205/65 R16	MAXXIS	7 mm	
L/H Rear Tyre	205/65 R16	MAXXIS	7 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	11/05/2018	Inspection Date	14/05/2018	
Survey held at	PREMIER AUTOMOTIVE SERVICES PTE LTD 23 CHANGI SOUTH AVENUE 2 #01-02 SINGAPORE 486443			
<b>5a. Remarks</b>				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



# 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

Page No.: 1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 6212E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	BOOTLID CRDI	NECESSARY	29.00	29.00
1	BOOTLID LOWER GARNISH	CRACKED	290.00	290.00
1	REAR BUMPER	DEFORMED	696.00	696.00
1	REAR BUMPER LOWER COVER	CUT	206.00	206.00
2	REAR BUMPER SIDE BRACKET O/S & N/S @\$29.00	SERVICEABLE	58.00	-
1	REAR BUMPER INNER SPONGE	TORN	114.00	114.00
1	REAR BUMPER REINFORCEMENT	CRACKED	607.00	607.00
2	REAR BUMPER STAY O/S & N/S @\$53.00	BENT	106.00	106.00
2	REAR BUMPER REINFORCEMENT LOWER BRACKET @\$18.00	CRACKED	36.00	36.00
2	REAR BUMPER REINFORCEMENT UPPER BRACKET @\$18.00	CRACKED	36.00	36.00
1	REAR BUMPER O/S REFLECTOR	SERVICEABLE	46.00	-
	LESS 10% DISCOUNT		-222.40	-212.00
			2,001.60	1,908.00
<b><u>SPECIAL NETT ITEMS</u></b>				
1	SET BOOTLID LOWER GARNISH CLIPS (SN)	NECESSARY	60.00	60.00
1	SET REAR BUMPER CLIPS (SN)	NECESSARY	48.00	48.00
1	SET REVERSE SENSOR (SN)	SHORTED	280.00	200.00
1	SET BOOTLID STICKERS (SN)	NECESSARY	100.00	100.00
1	SUNDRY (SN)	NECESSARY	50.00	20.00
			538.00	428.00
<b><u>LABOUR</u></b>				
	TOWING FEE.		50.00	50.00
	TO DISMANTLE/REPLACE/TEST/REVERSE SENSOR TO NEW BUMPER AND RESET TO THE SAME.		120.00	20.00
	TO DISMANTLE/REFIT THE INNER GARNISHES, INNER LININGS, INNER TRIMS, CUSHION SEAT, CARPET, ETC TO FACILITATE REPAIRS.	NOT NECESSARY	180.00	-
	TO LABOUR CHARGE FOR DISMANTLE AND RENEW THE ACCIDENT DAMAGED PARTS. INCLUDING KNOCK-OUT, STRAIGHTEN, REPAIR, RESHAPE AND ADJUST OF THE BOOTLID LOWER GARNISH, ETC.		750.00	500.00
	TO PUTTY AND SPRAY PAINTING ON REAR BUMPER, BOOTLID LOWER GARNISH, BOOTLID.		600.00	540.00

Report Ref No. CC3/TP18008860/K1ea3n2



## 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

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO APPLY RUSTPROOFING ON THE REPAIRED AND REPLACED PANELS.	NOT NECESSARY	150.00	-
			1,850.00	1,110.00
	GRAND TOTAL		4,389.60	3,446.00
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			2,750.00

Report Ref No. CC3/TP18008860/K1ea3n2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

ADRIAN LING WAI PING

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

Licensed Appraiser

**DISCLAIMER OF LIABILITY TO THIRD PARTIES:-** This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.