

ASS REC. BY:

REF:

CG/III/8009217/Asbn2

Special Instruction:

Survivor:

Adrian

ASSIGNMENT (Office)

From (Person):

Gabriel Wee

of

III

Date/Time: 21052018 234pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJZ 6323Z

Insured:

SHA 2572C

at Workshop m/s

mcs Garage

Tel:

9270 0917

of

10 Kaki Bukit Rd 2 #03-25

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A.

19052018

(Client's Record)

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

21052018

H.O.D. Endorsement:

Date/Time:

21052018 2:56pm

Person Contacted:

Kendrick

Vehicle IN OUT

Date/Time

Action/Instruction (✓) Estimate

SJZ 6323Z - X

SHA 2572C - C3 / C413017889 / Yapq

QA: 200913

12/06/18 (\$8,030.00 - \$3,200.00) - Reduction = 60%

REF:

II

STANDARD

ASSIGNMENT

From:

Date:

22/5/2018

Veh No:

SJ26323Z

Yr Regn:

2010

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

SJ2 6323 Z

Make:

Hyundai Avante

c.c.

1591

at Workshop m/s

MCS Garage

Colour:

Purple

A/C:

Insured / Std / NI / NA

of

10 Kalki Bkt Rd 2 #03-25

Sp. Reading

123 579

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

KMH1DU41B01A4024061

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

Modi: Nil / S/Rim / STD A/Rim or

(Policy Condition)

Tyre Size:

F:

185/60R15

R:

185/60R15

Remark: The veh had commenced its

repair at the time of inspection.

N/S	O/S

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

TOYO / YOKO or

Triangle

Bal. or Market Value:

Front

Rear

IDAC Accident Rpt:

Consistent? : Yes or No

R/Bal.

06

mm

R/Bal.

06

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

06

mm

L/Bal.

06

mm

Est. Repairs:

days

Res.:

Yes or No

D.O.A.

D.O.I.

22/05/18

Lum Sum:

%

3 Val.:

Yes or No

Survey held at

MCS Garage

CA / REV / REP. / 24 HRS (wp)

Vehicle: IN / OUT

Date:

Person Contacted:

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

Front o/s

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

Date / Time

Action / Instruction

TP III

RECEIVED 12 JUN 2018

Date/Time: File Pass to?

12/06/18

1)

Typist

Date/Time: File Return to?

2)

☐

Preli. Report

☒

Final Report

Days Of Repair:

5

Resurvey No. of Trip:

2

Survey Fee:

Transportation

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

) \$ + RS \$

) Photos

) Others

TOTAL

250
10

260

Report Format :

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

45 \$ 3,200/-

Catherine Chong (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Monday, 21 May, 2018 2:34 PM
To: Margaret Lim; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)
Cc: Sherini Pillai
Subject: RE: URGENT - Accident involving SJZ6323Z & SHA2572C on 19/05/2018 (Our File Ref: PD/DL/1800802 (ml))
Attachments: PRS Letter to India 21052018.pdf; 2nd PRS Letter to India 21052018.pdf

Dear Sir / Mdm,

Please conduct a survey on TP vehicle SJZ6323Z and let us have your report urgently.

This claim will be handled by Ms Sherini.

*Kindly upload this survey request email to merimen.

Thank You.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: Margaret Lim [mailto:MargaretLim@satwantlaw.com.sg]

Sent: 21 May, 2018 2:10 PM

To: Motor Claim - III <motorclaim@iii.com.sg>

Cc: MCS Garage - Kenrick <suheng@gmail.com>; Danny Lim <limdanny@satwantlaw.com.sg>;
elleen@satwantlaw.com; jeremytan@satwantlaw.com

Subject: Re: URGENT - Accident involving SJZ6323Z & SHA2572C on 19/05/2018 (Our File Ref: PD/DL/1800802 (ml))

WITHOUT PREJUDICE

Hi Gabriel,

We have instructions to select the following SJE:

- LKK Auto Consultants Pte Ltd

Kindly see our attached letter and the workshop details as below:-

Workshop Name: MCS Garage

Address: 10 Kaki Bukit Road 2 #03-25 (S) 417868

Contact Person: Kenrick

Contact No.: 9270 0917

Kindly liaise directly with the workshop for the PRS on an urgent basis. Thank you.

Thank you & Best Regards
Margaret Lim (Branch Office)
Secretary

For and on behalf of

SATWANT & ASSOCIATES

Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Branch Office: 450 Lorong 6 Toa Payoh #02-03 Harsing Centre Singapore 319394 | tel: 6221 6114 | fax: 6266 6925

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From: Motor Claim - III <motorclaim@iii.com.sg>

Sent: Monday, May 21, 2018 1:36 PM

To: Margaret Lim

Subject: RE: URGENT - Accident involving SJZ6323Z & SHA2572C on 19/05/2018 (Our File Ref: PD/DL/1800802 (ml))

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: Margaret Lim [<mailto:MargaretLim@satwantlaw.com.sg>]

Sent: 21 May, 2018 12:16 PM

To: Motor Claim - III <motorclaim@iii.com.sg>

Cc: MCS Garage - Kenrick <suheng@gmail.com>; elleen@satwantlaw.com; Danny Lim <limdanny@satwantlaw.com.sg>; jeremytan@satwantlaw.com

Subject: URGENT - Accident involving SJZ6323Z & SHA2572C on 19/05/2018 (Our File Ref: PD/DL/1800802 (ml))
Importance: High

WITHOUT PREJUDICE

Dear Sir/Madam,

Please see attached our PRS letter for your urgent attention. Thank you.

Thank You & Best Regards,

Margaret Lim (Branch Office)

Secretary

For and on behalf of

SATWANT & ASSOCIATES

Advocates & Solicitors | Notary Public | Commissioner for Oaths

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Branch office: 450 Lorong 6 Toa Payoh #02-03 Hersing Centre Singapore 319394 | tel: 6221 6114 | fax: 6224 3528

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Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Conveyancing: Blk 186 Toa Payoh Central #02-420, Singapore 310186 | tel: 6635 7493 | fax: 6635 7494

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

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India International Insurance Pte Ltd.

Registration No. 198703792-K

Satwant & Associates

Advocates & Solicitors | Notary Public | Commissioner for Oaths

Main Office: No. 3 Jalan Bingka, Singapore 588896 | tel: 6299 9470 | fax: 6299 5541

Conveyancing: Blk 186 Toa Payoh Central #02-420, Singapore 310186 | tel: 6635 7493 | fax: 6635 7494

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Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Satwant Singh
Danny Teo Kim Soon
Priyam Singh
Khong Zi-Wei



CONVEYANCING OFFICE:
450 Lorong 6 Toa Payoh
#02-03 Harsing Centre
Singapore 319394
Tel: 6221 6114
Fax: 6266 6925
www.satwantlaw.com.sg
(Fax not for service
of documents)

An Official Member of The Lawyer Network, an international network of law firms

(Please quote our Ref. when replying)

Your Ref: To be advised
Our Ref: PD/DL/1800802 (ml) – Toa Payoh Office
(margaretlim@satwantlaw.com.sg)

21 May 2018

India International Insurance Pte Ltd
64 Cecil Street
#04 / #05 / #06-02 IOB Building
Singapore 049711

BY EMAIL ONLY

Attention: Motor Claims Department

Dear Sir/Mdm,

ACCIDENT INVOLVING SJZ6323Z & SHA2572C ALONG HOUGANG MALL (DROP-OFF POINT) ON 19/05/2018 @ 11:40

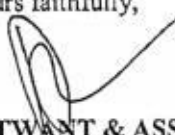
We refer to your email dated 21 May 2018 confirming your intention to conduct a pre-repair survey on our client's vehicle SJZ6323Z.

Please be informed that said vehicle can be inspected at:

Workshop: MCS Garage
Location: 10 Kaki Bukit Road 2 #03-25 Singapore 417868
Contact Person: Kenrick (HP: 9270 0917)

In the event you fail to conduct the pre-repair survey within the next 2 working days, excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Yours faithfully,


SATWANT & ASSOCIATES
(Danny Teo)

cc client

For Surveyor: To initial after Completion

1st Inspection
Appointed surveyor
(Name & Signature)

Date & Time

2nd Inspection
Appointed surveyor
(Name & Signature)

Date & Time

3rd Inspection
Appointed surveyor
(Name & Signature)

Date & Time

NB: Any Settlement of offer is on the express condition that this settlement is in respect of our client's claim for property related damaged only and shall not preclude our client from claiming injury-related damages arising from this accident.
This document is intended for the addressee(s) only and may contain confidential information and/or may be subject to legal privilege. If you have received this in error, please contact us immediately and destroy the original message.

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 lodging of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of this report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	19/05/2018 13:22
Date Of Accident	19/05/2018 11:40
Exact Location Of Accident	HOUGANG MALL (DROP-OFF POINT)
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ6323Z
Insured/Policyholder	
Name Of Registered Owner	RED RAIN
Cn Reg No	53376963M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-88090688

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE 1.6 AT ABS D/AB 2WD 4DR
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?	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	5098031778 CLASSIC
Cover Note Number	

Driver

Name of Driver	FOO CHEEK ANN, KELVIN (FU JIAN)
NRIC No	S8821078F
Date Of Birth	22/06/1988
Occupation	OUTDOOR
Date Of Driving Pass	29/04/2009
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88090688
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 367 TAMPINES ST 34 #04-93
 Postcode 520367
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - OWN COMPANY
 Vehicle Registration Number of Driver's Own Vehicle -
 Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - OPENING DOOR OF VEHICLE
 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? YES
 If Yes, Please state which Police Station
 Police Station Name TAMPINES EAST NEIGHBOURHOOD POLICE POST
 Police Station Address ROAD: BLK 263 TAMPINES STREET 21 #01-128 , POSTCODE: 520263 ,
 COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-7839999 - FAX NO: 67832500
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED

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 SHA2572C
 Vehicle Make/Model/Colour HYUNDAI I40 1.7 CRDI
 Details Of Properties
 Vehicle Category TAXI
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	FOO CHEEK ANN, KELVIN (FU JIAN)
Approximate Age	
Injuries Sustain	PAIN ON RIGHT SHOULDER, RIGHT ARM
Injured person in which vehicle?	SJZ6323Z
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Stamp

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

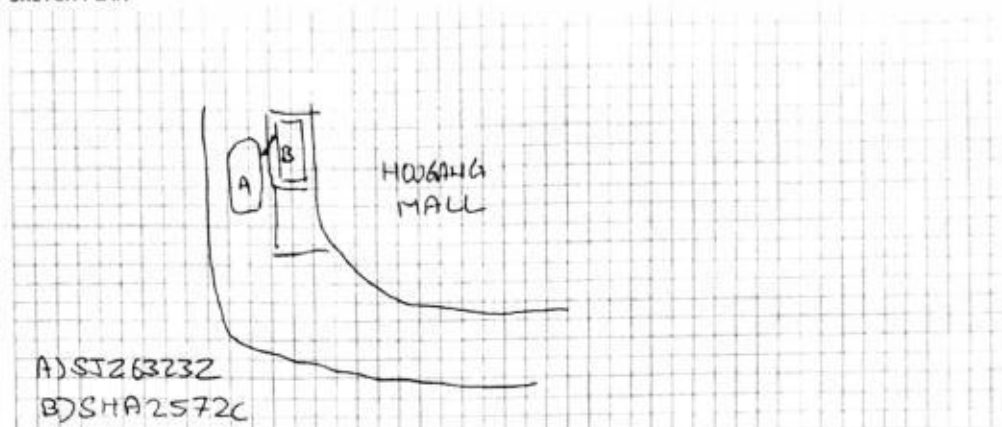
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 19 MAY 2018

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: crackb@singnet.com.sg
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS MOVING OFF FROM THE DROP OFF POINT ~~WHEN~~ and was passing by the stationary taxi SHA2572C on my right when the passenger at the front suddenly open the door and hit onto the front right portion of my car.

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 **19 MAY 2018**

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4
Singapore 415933

Tel: 67416697 Fax: 67492305

Email: yackb@singnet.com.sg

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20180519/2125

1 of 3

Report No. T/20180519/2125

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2018 18:10	Vide Report No.: E/20180519/0156	Station Diary No.: 36
--	-------------------------------------	--------------------------

Informant's Particulars

Name of Informant: FOO CHEEK ANN, KELVIN			Address: APT BLK 367 TAMPINES STREET 34 #04-93 SINGAPORE 520367	
ID Type / ID No.: NRIC NO / S8821078F			Contact No.: Home/Office:	Mobile: 88090688
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 29	Date of Birth: 22/06/1988	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/05/2018 11:40	Type of Location: Straight Road
Location: Along Road 1 HOUGANG AVENUE 10				
Hougang Mall				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA2572C	Car	HYUNDAI	I40 1.7 CRDi F/L AT ABS AIRBAG 4DR	Blue		1
SJZ6323Z	Car	HYUNDAI	AVANTE 1.6 AT ABS D/AB 2WD 4DR	Maroon	Slightly Damaged	0

Individual Statement Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180519/2125

2 of 3

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

Report No. T/20180519/2125

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved No			
No. of Pedestrians Injured NIL		Use of Pedestrian Crossing NA	
Driver			
Name	THNG CHEOW YONG	ID No	S1472224F
Related Vehicle	SHA2572C (Car)	Contact No	96583909
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	FOO CHEEK ANN, KELVIN	ID No	S8821078F
Related Vehicle	SJZ6323Z (Car)	Contact No	88090688
Hospital/Clinic	MOUNT ELIZABETH HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/05/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 19/5/2018 at about 1140hrs, I had just dropped off a passenger at Hougang Mall. As such I had proceeded to exit from the drop off point. I saw that there was a stationary taxi at the taxi stand.

As I drove past the taxi, all of a sudden, the front passenger door swung open and struck my fender. I had immediately stopped my car and reversed my car as I wanted to exit my car. There were no visible injuries on parties involved. As such I had exchanged particulars and took photos of the scene.

After leaving the place, I felt pain in my right shoulder and right arm and as such I went to Mount Elizabeth for outpatient treatment and I was given 3 days of medical leave (19/5/2018-21/5/2018)



**SINGAPORE
POLICE FORCE**



T/20180519/2125

3 of 3

Report No. T/20180519/2125

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /
Sgt 2 BRYAN LIM GHIM SONG

Signature Of Interpreter:
Not applicable

Signature Of Informant:

Date/Time:
19/05/2018 18:10

Officer In Charge Of Case:

TP / GIT /
SI YEO CHUN JIAN
Contact No.: 65476213



Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

MCS Garage

10 Kaki Bukit Road 2 #03-25, First East Centre Singapore 471868

Tel: 9270 0917 6538 4322

TP111
Shirley

Vehicle No.: SJZ 6323Z

Model: HYUNDAI AVANTE

QTY	List Price:	Prices \$
1	Front bumper <i>Distorted</i>	486.90 ✓
1	Front bumper lower grille <i>new</i>	112.60 x
2	Front bumper side retainers- R/L @ 42.50 <i>RH new</i>	85.00 <i>42.50</i>
1	Front bumper sponge <i>} new</i>	110.80 x
1	Front bumper reinforcement <i>} new</i>	365.50 x
10	Front bumper clips @ 4.50 <i>new</i>	45.00 <i>30</i>
1	Front bonnet <i>Repair</i>	1102.60 x
1	Front bonnet lock <i>new</i>	89.50 x
1	Front fender- RH <i>Distorted</i>	441.60 ✓
1	Front fender emblem " VVi " <i>new</i>	38.20 ✓
1	Front fender inner shield <i>Deformed</i>	112.60 ✓
15	Front fender inner shield clips @ 4.50 <i>new</i>	67.50 <i>30</i>
1	Front fender inner panel <i>Repair</i>	445.00 x
1	Front headlamp assy <i>cracked</i>	481.90 ✓
1	Front support panel <i>cracked</i>	765.00 ✓
1	Front shock absorber- RH <i>} new</i>	435.60 x
1	Front lower arm <i>} new</i>	420.80 x
1	Front knuckle arm <i>} new</i>	465.00 x
1	Front wheel bearing <i>new</i>	180.60 ✓
1	Washer tank <i>new</i>	160.80 x
		<hr/> 6412.50
	Less 20%	(1282.50)
	Subtotal	<hr/> 5130.00

2609.3
2087.44

Special Nett Items:

1	Front tyre- RH <i>size new</i>	200.00 <i>x</i>
	Subtotal	200.00

Labour Charges:

Towing	100.00 <i>x</i>
To remove, refix F/undercarriage	250.00 <i>100</i>
To check wheel alignment	120.00 <i>80</i>
To checking F/electrical wiring	50.00 <i>30</i>
To respray undercoating	80.00 <i>x</i>
To respray painting and etc	900.00 <i>800</i>
Panel beating, cut, weld, remove and replacing above parts	1200.00 <i>900</i>
Subtotal	2700.00

ESTIMATE PARTS AND LABOUR GRAND TOTAL \$ 8030.00

total 309744

H/S 32K.

05 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:

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/III18009217/ASBN2

Date: 19/06/2018

REFERENCE

Handling Insurer:	India International Insurance Pte Ltd	Policy No:	
Claimant Vehicle No :	SJZ6323Z	Insured Vehicle No :	SHA2572C
Date of Loss:	19/05/2018	Nature of Claim:	TP
		Claim No:	N/A

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SJZ6323Z	Engine No:	G4FCAU851709
Make & Model:	HYUNDAI AVANTE, 1.6 (A)	Chassis No:	KMHU41BMAU024061
Reg. Date:	15/12/2010 (Man. Year: 2010)	Odometer:	123579 km
Colour:	Purple		
Engine Capacity:	1591 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:	195/60 R15	Rear Tyre Size:	195/60 R15
Front Left Side:	Triangle 6 mm	Rear Left Side:	Triangle 6 mm
Front Right Side:	Triangle 6 mm	Rear Right Side:	Triangle 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	5,330.00	2,087.44	3,242.56	60.84
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,700.00	1,910.00	790.00	29.26
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	8,030.00	3,997.44	4,032.56	50.22
Approved Total (Overridden) (S\$)		3,200.00		
Nett Amount (S\$)	8,030.00	3,200.00	4,830.00	60.15

INSPECTION

Date of Assignment:	21/05/2018	
Date Inspected:	22/05/2018 Inspected At:	MCS GARAGE (HQ) 10 KAKI BUKIT ROAD 2, #03-25 FIRST EAST CENTRE Singapore 417868

Estimated Period of Repair: 5.0 days

Adjuster: ADRIAN LING

Manager: Hiew May Fung

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: 19 Jun 2018)
Parts: 143	HYUNDAI AVANTE 1.6 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SJZ6323Z)	
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		*FRONT BUMPER	Distorted	486.90 FL	*486.90 FL
2	1		*FRONT BUMPER LOWER GRILLE	Not Necessary	112.60 FL	*- FL
3	1		*FRONT BUMPER SIDE RETAINERS-R/L	O/s Necessary	85.00 FL	*42.50 FL
4	1		*FRONT BUMPER SPONGE	Not Necessary	110.80 FL	*- FL
5	1		*FRONT BUMPER REINFORCEMENT	Not Necessary	365.50 FL	*- FL
6	10		*FRONT BUMPER CLIPS	Necessary	45.00 FL	*30.00 FL
7	1		*FRONT BONNET	Repair	1,102.60 FL	*- FL
8	1		*FRONT BONNET LOCK	Not Necessary	89.50 FL	*- FL
9	1		*FRONT FENDER-RH	Distorted	441.60 FL	*441.60 FL
10	1		*FRONT FENDER EMBLEM VVI	Necessary	38.20 FL	*38.20 FL
11	1		*FRONT FENDER INNER SHIELD	Deformed	112.60 FL	*112.60 FL
12	15		*FRONT FENDER INNER SHIELD CLIPS	Necessary	67.50 FL	*30.00 FL
13	1		*FRONT FENDER INNER PANEL	Repair	445.00 FL	*- FL
14	1		*FRONT HEADLAMP ASSY	Cracked	481.90 FL	*481.90 FL
15	1		*FRONT SUPPORT PANEL	Cracked	765.00 FL	*765.00 FL
16	1		*FRONT SHOCK ABSORBER-RH	Not Necessary	435.60 FL	*- FL
17	1		*FRONT LOWER ARM	Not Necessary	420.80 FL	*- FL
18	1		*FRONT KNUCKLE ARM	Not Necessary	465.00 FL	*- FL
19	1		*FRONT WHEEL BEARING	Necessary	180.60 FL	*180.60 FL
20	1		*WASHER TANK	Not Necessary	160.80 FL	*- FL
21	1		*FRONT TYRE-RH	Not Necessary	200.00 FS	*- FS

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

Sub Total (\$\$)	6,612.50	2,609.30
- List Item Discount on L Items 20.00/20.00% (\$\$)	1,282.50	521.86
Total Parts (\$\$)	5,330.00	2,087.44

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	TOWING	New	100.00	-
2	TO REMOVE,REFIX F/UNDERCARRIAGE	New	250.00	100.00
3	TO CHECK WHEEL ALIGNMENT	New	120.00	80.00
4	TO CHECKING F/ELECTRICAL WIRING	New	50.00	30.00
5	TO RESPRAY UNDERCOATING	New	80.00	-
6	TO RESPRAY PAINTING AND ETC	New	900.00	800.00
7	PANEL BEATING,CUT,WELD,REMOVE AND REPLACING ABOVE PARTS	New	1,200.00	900.00
Gross Labour Cost (S\$)			2,700.00	1,910.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >