

ASS. REC. BY:

REF:

CS/ASM18010874/Kqd32

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

Yvonne Ang

of

ASM(AXA)

Date/Time:

14/06/2018

Estimated Cost:

Bill to:

☒

TP/WS/TP RES / OD RES / EVA / INV / MV7 CS

To Inspect Vehicle No:

SGT 532T

Insured:

at Workshop m/s

Ah Lim Motor

Tel:

64831244 / 64563637

of

176 Sin Ming Drive # 05-12

Policy No:

Claim No:

88M00KPJ

Sum Insured:

Excess:

NIL + \$ 500.00

Make of Veh:

(Client's Record)

D.O.A.

12/06/2018

CA / ☒ REV

REP. / REV 24 HRS

Date/Time:

12:00pm @ 14/6/18

Person Contacted:

Huey Tex

H.O.D. Endorsement:

Vehicle:

☒ IN / OUT

Date/Time

Action/Instruction

☒

Estimate

SGT 532T - X

14/6/18 @ 2:55pm

revert to Yvonne Ang via Smart Claim

14/6/18 @ 3:13pm

Yvonne Ang informed C/A via Smart Claim.

14/6/18 @ 3:27pm

informed Mei Li C/A & Ex: \$500 by email.

82719.20 (Red \$ 473.60, 15%)

REF: ASM(AXA)

08/ASM18010874/Kgd3

ASSIGNMENT

From:

Date:

14/06/18

Estimated Cost:

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

To Inspect Vehicle No:

SGT 532T

at Workshop m/s

Ah Lim Motor

of

176 Sin Ming Drive #05-12

Insured:

Policy No.

Claims No.

Sum Insured:

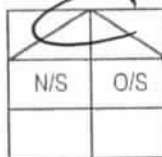
Excess: \$500.00

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

\$28k

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

05 days

Res.: Yes or No

Lump Sum:

1.3.1 %

3 Val.: Yes or No

CA ☒ REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SGT 532T

Yr Regn:

03, 09

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

Truck / Trailer or

Make:

Lexus

15250 c.c.

2500

Colour

M. P. White

A/C: Insured / Std / NI / NA

Sp. Reading

14P834

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JT14BK262305087837

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD ☒ A/Rim or

Tyre Size:

F:

225/45R17

R:

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal.

4

mm

R/Bal.

5

mm

L/Bal.

4

mm

L/Bal.

5

mm

D.O.A.

12/6/18

D.O.I.

14/6/18

Survey held at

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

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

Date / Time

Action / Instruction

18/6 15h pass to Customer

RECEIVED 13 SEP 2018

12/9/2018

Date/Time: File Pass to?

☐

Prel. Report

1) 12/9 14h pass to Customer

☐

Final Report

Date/Time: File Return to?

Days Of Repair:

5

Resurvey No. of Trip:

1

Survey Fee:

150

Transportation

) S + RS) SI

) Photos

) Others

TOTAL

150

Report Format :

Smart Claim

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

2719.00

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech Insp (\$

☐

Weekend (\$



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

AXA INSURANCE PTE LTD

Ref : CS/ASM18010874/Kqd3

8 SHENTON WAY #24-01
AXA TOWERS SINGAPORE 068811

Date : 14-06-2018



Code : ASM

1. Policy Particulars :- OWN DAMAGE

Insured Veh.	Veh. Inspected	SGT 532T
Policy No.	Coverage (\$)	0.00
Claim No. S8M00KPJ	Excess (\$)	500.00
Assign From SMARTCLAIM (YVONNE ANG)	Assign Date	14/06/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No. HIDDEN	Year of Reg.	
Chassis No.	Colour	
Odometer -	Steering	
Brakes	Modification	
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--

5. General Information

Accident Date	12/06/2018	Inspection Date	14/06/2018
Survey held at	AH LIM MOTOR COMPANY 176 SIN MING DRIVE #05-12 SIN MING AUTOCARE SINGAPORE 575721		

5a. Remarks

A) THE MARKET VALUE IS S\$----- (EST. AVERAGE)
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.




Service Request Details

Claim

S8M00KPJ

Reference

None 

Loss Date

June 12, 2018

Request Date

June 14, 2018

Due Date

June 22, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (OD)

Type of Loss

Own Damage

Services

Accelerated workshop survey

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SGT532T

Make

LEXUS

Service Address

176 Sin Ming Drive #05-12, , 575721

Primary Contact/Insured

LIM CHOON LOCK
3 HIGHLAND CLOSE, 549215, Singapore
94768400
harroldlimtingchong@gmail.com

Claim Handler

ANG Yvonne
6568804461
yvonne.ang@axa.com.sg

Additional Instructions

EXCESS NIL + \$500 (UN-NAMED DRIVER)

[Messages](#)[Invoices](#)[History](#)[Documents](#)[Assessment](#)[Metrics](#)[Notes](#)[New Message](#)

SGT5327



FINAL ASSESSMENT

Type

🔍 Question

Message

WE HAD RECEIVED FINAL REPAIRER INVOICE AND DV PLEASE LET US HAVE YOUR FINAL ASSESSMENT FOR PAYMENT

Reply

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Thursday, 14 June 2018 3:22 PM
To: meili@almsm.com.sg
Cc: SUR
Subject: VEHICLE SGT 532T (DOA: 12/06/2018)

Dear Mei Li,

As instructed by our client, please proceed to repair the insured vehicle **SGT 532T (Excess \$500/-)**.

If there are any check items or supplementary items please inform our office's Assignment Team at Tel: 6741 8434 to arrange our surveyor for inspection.

All supplementary items and unconfirm items are subjected to further approval from insurance company before completion of the repair.

*Our client reserve their right **not to pay** if there is no valid approval obtained before repair.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

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



Accident Photo



Re:RE: PRELIMINARY ADVICE OF VEHICLE SGT 532T UPLOADED

Type

🔗 Question

Message

Please proceed to authorize repair

Reply

RE: PRELIMINARY ADVICE OF VEHICLE SGT 532T UPLOADED

Type

 Question

Message

Kindly advise on authorisation.

Reply



PRELIMINARY ADVICE OF VEHICLE SGT 532T UPLOADED

Type

🔔 Question

Message

Dear Yvonne, please be informed that the preliminary advice of vehicle SGT 532T uploaded. - Shiau Chan

Reply



Auto
Consultants
Pte Ltd

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

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 14/06/18

Survey Details:

Date of loss	12-Jun-18
Date of appointment	14-Jun-18
Date of survey	14-Jun-18
Location of survey	AH LIM MOTOR

Vehicle Details:

Claim Type:	Own Damage
Vehicle number	SGT 532T
Make and Model	TOYOTA LEXUS IS250 AUTO STD FL
Date of registration	10/3/2009
Excess	\$ 500.00
Market Value	\$ 28,000.00
Parf Rebate	\$ 18,907.00
Nett Loss	\$ 9,093.00

Repair details:

Initial Estimate	\$ 2,812.80
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 1,134.80
Check items (estimate)	\$ -
Labour	\$ 1,220.00
Total	\$ 2,354.80
Lump Sum(if applicable)	\$

Number of days for repair	<u>5</u>
---------------------------	----------



Auto
Consultants
Pte Ltd

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

Remarks:

DAMAGES CONSISTENT. PENDING FOR TWO PARTS PRICES.

Mandate:

Liability(TP)	%	
Proposed repair cost	\$	
Loss of use	\$	no. of days
Loss of rental	\$	no. of days
Loss of income	\$	no. of days
LTA search fees	\$	
Others	\$	
Proposed Total	#VALUE!	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	7024F
Vehicle Details	
Vehicle No.:	SGT532T
Vehicle to be Exported:	Yes
Intended De-registration Date:	20 Jun 2018
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS IS250 AUTO STD FL
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	4GR0519001
Chassis No.:	JTHBK262305087837
Maximum Power Output:	153.0 kW (205 bhp)
Open Market Value:	\$37,374.00
Original Registration Date:	10 Mar 2009
First Registration Date:	10 Mar 2009
Transfer Count:	0
Actual ARF Paid:	\$37,374.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Mar 2019
PARF Rebate Amount:	\$18,687.00
Intended COE Rebate Details	
COE Expiry Date:	09 Mar 2019
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$5,701.00
COE Rebate Amount:	\$220.00
Total Rebate Amount:	\$18,907.00

The information contained herein is correct as at 13 Jun 2018

OK

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	13/06/2018 17:33
Date Of Accident	12/06/2018 20:30
Exact Location Of Accident	UPP CROSS ST B4 SLIP RD ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT532T
Insured/Policyholder	
Name Of Registered Owner	LIM CHOON LOCK
NRIC No	S0187024F
Email Address	HARROLDLIMTINGCHONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98485852
Alternative Phone No	OTHERS-94768400

Vehicle Particulars

Manufacturer	TOYOTA
Model	LEXUS IS250
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA022423
Cover Note Number	

Driver

Name of Driver	LIM TING CHONG, HARROLD
NRIC No	S8849040A
Date Of Birth	20/11/1988
Occupation	INDOOR
Date Of Driving Pass	13/02/2007
Driving Experience	11 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94768400
Fax Number	
Contact Number	OTHERS-98484852
Email Address	HARROLDLIMTINGCHONG@GMAIL.COM

Address	3 HIGHLAND CLOSE
Postcode	549215
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGQ1787J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE WEN SI
NRIC/Passport Number	S8613010F
Contact Number	91073313
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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

ACA

Vehicle :- SGT
532T

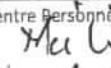


Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time: 13/6/18



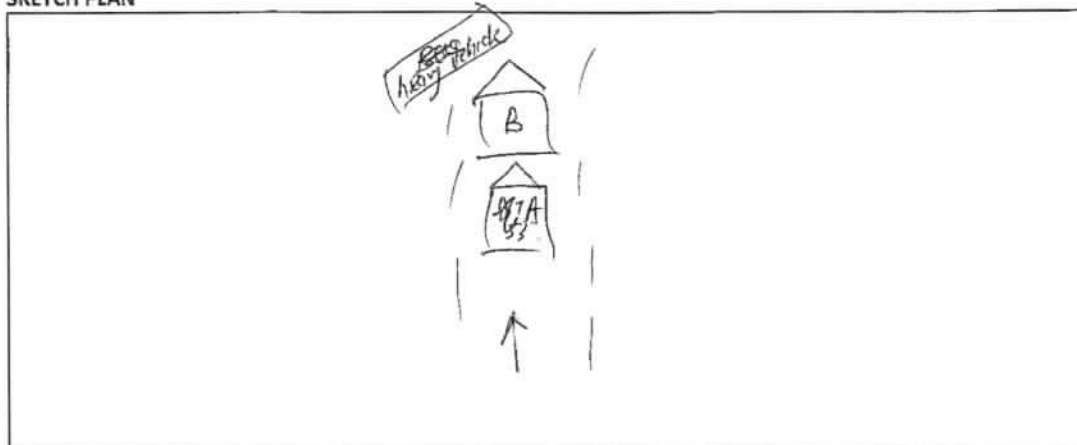
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.: 13/6/18



Sketch Plan Pg. 2

Date of accident: 12/6/18 Time: 8:30 PM Location: Upper Cross Street
 My Vehicle A: SGT 532T Vehicle B: SGQ 1787J Vehicle C: —

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Head (SGT 532T) to Rear (SGQ 1787J).

heavy vehicle cuts in path of vehicle B, suddenly with no signal
 vehicle B makes an emergency brake to a stand still
 vehicle A was not able to brake in time
 and collided with vehicle

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

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

My workshop :

Email address :

& myself :

Email address : harroldlimtingchong@gmail.com

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

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnels Signature

Name:

NRIC/FIN No.:





redefining / insurance

LIM CHOON LOCK
3 HIGHLAND CLOSE
SINGAPORE 549215

AXA Insurance Pte Ltd
☎ 1800 880 4888 (Within Singapore)
(65) 6880 4888 (International)
☎ (65) 6880 4740
✉ customer.care@axa.com.sg
🌐 www.axa.com.sg

Renewal

date
06/03/2017

your servicing distributor
LI CHOO TRICIA TAN / 03998

your servicing distributor contact

Policy Schedule**Your SmartDrive Comprehensive Private APW****Your policy snapshot**

Policyholder name	LIM CHOON LOCK	Policy number	VA1 / GA022423
Cover	Comprehensive	FIN / NRIC	S0187024F
Period of Insurance	from 10/03/2017 to 09/03/2018 (both dates inclusive)		

Premium breakdown

Gross Premium after 50% NCD	SGD 1,164.07
Total Discounts	- SGD 116.41
7% GST	SGD 73.34
Final Premium	SGD 1,121.00

Your benefits highlights

(refer to Policy Wording for full terms and conditions)

SmartDrive Comprehensive Private APW Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability
- Loss of Personal Effects in Singapore up to \$3,000
- Daily Transport Allowance of \$50 for a maximum of five (5) days
- Personal accident benefit of up to \$30,000 for you or your named drivers while driving
- Medical and dental expenses up to \$500 per person for either you as the driver or your authorised driver and a passenger
- Basic Own Damage Excess Reduction for AXA Premium Workshop
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess

Vehicle details

Make & Model of Vehicle	LEXUS IS250	Year of manufacture	2008
Vehicle registration number	SGT532T	Type of Use	Private use
Body type	SALOON	Engine capacity (c.c.)	2500
Seating capacity (excl driver)	4	Engine number	4GR0519001
Off-Peak car	No	Chassis number	JTHBK262305087837

Insured's Estimated Market Value	Market Value at the time of Loss (including accessories and spare parts)
Limitation to use	As per Certificate of Insurance
Finance Loan Company	Nil

Excess applicable (refer to Policy Wording for other applicable Excesses)

Basic Own Damage Excess	SGD 0.00
Windscreen Excess	SGD 100.00

AXA Insurance Pte Ltd (199903512M)
8 Shenton Way, #24-01, AXA Tower,
Singapore 068811
Customer Centre, #B1-01

1 of 2

Driver's Particulars Pg. 2



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

	PASS DATE
Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	13 Feb 2007

NP 428A





AH LIM MOTOR COMPANY

176 Sin Ming Drive #05-12 Sin Ming Autocare Singapore 575721
TEL: 6456 3637 FAX: 6456 3686 Email: admin@almsm.com.sg
GST:M9-0009639-E RCB NO:06470300B

SURVEYOR COPY

M/S : AXA INSURANCE PTE LTD
8 SHENTON WAY
#27-01 AXA TOWER
SINGAPORE 068811

TEL: 63387288

FAX: 63382522

ATTN: Motor Claim Department

Your Ref No: S8M00KPJ

Claim Type: Own Damage

Accident Date: 12/06/2018

Estimate No: MCS1102442

Date: 13 Jun 2018

Policy No: GA022423

Veh Reg No: SGT532T

Make/Model: TOYOTA LEXUS 1S250

Not Withheld
Resurvey by pgim



Ex 8500h

fax: 62564315

Estimate Repair Cost to Vehicle No :SGT532T

Description	U/Price	Quantity	Cost	Amount
			SS	SS
SPARE PARTS				
1 FRONT BONNET - CHECK PRICE		1 PC	0.0000	
2 FRONT BONNET INSULATOR CLIP		12 PC	15.60	
3 FRONT BONNET RUBBER SEAL		1 PC	28.00	
4 FRONT BUMPER		1 PC	190.00	
5 FRONT BUMPER SIDE RETAINER LH		1 PC	30.00	
6 FRONT BUMPER SIDE RETAINER - RH		1 PC	30.00	
7 FRONT BUMPER CLIP		20 PC	26.00	
8 FRONT BUMPER SPONGE		1 PC	45.00	
9 NO PLATE GARNISH		1 PC	55.00	
10 RADIATOR GRILLE		1 PC	165.00	
11 RADIATOR GRILLE CHROME MOULDING		1 PC	115.00	
12 GRILLE LOGO		1 PC	30.00	
13 RADIATOR GRILLE TOP COVER CLIP		14 PC	18.20	
14 HEADLAMP - LH		1 PC	380.00	
15 HEADLAMP - RH - CHECK PRICE		1 PC	0.0000	
				1,127.80
Special Nett				
16 NO PLATE		1 PC	35.00	
				35.00
LABOUR				
17 TO CHECK WIRING AND REFOCUS HEADLAMP		1 PC	30.00	
18 TO REMOVE AND REPLACE A/C CONDENSER, PIPES AND RADIATOR, VACUUM A/C SYSTEM AS WELL AS		1 EA	120.00	
19 TO ISMANTLE THE FORNTAL DAMAGED PARTS. TO KNOCK & REPAIR FRONT TOP PANEL & AFFECTED AREAS & TO REFIT LISTED PARTS BACK SAME		1 PC	750.00	
20 TO SPRAY FRONT BONNET, FRONT BUMPER, FRONT FENDER LH, FRONT FENDER RH & RADIATOR TOP PANEL		1 PC	750.00	
				1,650.00

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:





AH LIM MOTOR COMPANY

176 Sin Ming Drive #05-12 Sin Ming Autocare Singapore 575721
TEL: 6456 3637 FAX: 6456 3686 Email: admin@almsm.com.sg
GST:M9-0009639-E RCB NO:06470300B

M/S : AXA INSURANCE PTE LTD

8 SHENTON WAY

#27-01 AXA TOWER

SINGAPORE 068811

TEL: 63387288

FAX: 63382522

ATTN: Motor Claim Department

Your Ref No: S8M00KPJ

Claim Type: Own Damage

Accident Date: 12/06/2018

Estimate No: MCS1102442

Date: 13 Jun 2018

Policy No: GA022423

Veh Reg No: **SGT532T**

Make/Model: TOYOTA LEXUS 1S250

Estimate Repair Cost to Vehicle No :SGT532T

Amount Before Excess	S\$ 2,812.80
Add GST @ 7%	196.90
Total Amount payable	S\$ 3,009.70

TOTAL: SINGAPORE DOLLAR THREE THOUSAND AND NINE AND CENTS SEVENTY ONLY

For AH LIM MOTOR COMPANY

AUTHORISED SIGNATURE



3,192.80