

ASS. REC. BY:

REF:

CS3/AIG18011091/U24d324

Special Instruction:



Surveyor:

Mehmen

ASSIGNMENT (Office)

From (Person):

Chin Lee Ying

of

AIG

Date/Time:

18/6/18 @ 4:54pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SFZ 7425D

Insured:

SKT 6144T

at Workshop m/s

Jementuh Motor Works

Tel:

9299 6636

of

Blk 14, Defu Lane 10 # 01-406

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

17/06/2018

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

H.O.D. Endorsement:

Date/Time:

9:53am @ 9/6/18

Person Contacted:

Ah Chuan

Vehicle IN (OUT)

Date/Time

Action/Instruction (X) Estimate

SFZ 7425D - X

SKT 6144T - X

25/6/18

After Repair

(08/11/13) wef

ASS REC BY: *Mercis*

REF:

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: *ST 77425D*at Workshop m/s *Jemunter*

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No: \_\_\_\_\_

Claims No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_

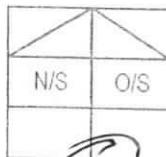
Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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

Bal. or Market Value: *18000*

IDAC Accident Rpt: \_\_\_\_\_

Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_

Consistent? : Yes or No

Est. Repairs: *4*

days

Res.: Yes or No

Lump Sum: *20*

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

*20/10/2020*

Date: \_\_\_\_\_

Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: *ST 77425D*Yr Regr: *10 05*

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

Truck / Trailer or *CA*Make: *Tayote**WSL*cc: *1794*Colour: *Grey*

A/C: \_\_\_\_\_

Insured / Std / NI / NA

Sp. Reading: *160/173*

T/Radio: \_\_\_\_\_

Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: *2NE 100 259346*

Gen. Cond: Good / Fair / Poor / Burnt

Steering: *(initials)* Jammed / Leaked / Burnt orBrake: *(initials)* Jammed / Leaked / Burnt orModi: *(initials)* Nil / S/Rim / STD A/Rim orTyre Size: F: *195/60R15*

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal. *5* mmR/Bal. *5* mmL/Bal. *5* mmL/Bal. *5* mmD.O.A. *17/6/18*D.O.I. *22/6/18*

Survey held at \_\_\_\_\_

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

*Rear*

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

Date / Time

Action / Instruction

*LTA 14402**No settlement.**2 yrs.**4th.**nett 4098**23/7/18**Submit DAR Report*

RECEIVED 23 JUL 2018

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee: *180*

Transportation: \_\_\_\_\_

Photos

Others *20*

TOTAL

*200*

Report Format: \_\_\_\_\_

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

**- PRE-REPAIR INSPECTION - ACCIDENT INVOLVING OUR INSURED VEHICLE  
SKT6144T AND SFZ7425D ON DOA 17/06/2018**

From: Chin, Lee-Ying  
To: assignments@lkkauto.com, Admin A  
Cc: Fong, Andy-SY  
Sent: Monday, 18 June, 2018 4:54:51 PM  
Attachments:  Fax8D84.tif

---

Hi LKK,

Kindly assist to survey.

Thanks.

Best Regards  
Lee Ying, Chin  
AIG

Claims | AIG Asia Pacific Insurance Pte. Ltd.  
78 Shenton Way #08-16 Singapore 079120  
Tel +(65) 6419 1947 | Fax +(65) 6835 7416  
[Lee-Ying.Chin@aig.com](mailto:Lee-Ying.Chin@aig.com) | [www.aig.com.sg](http://www.aig.com.sg)

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**Daniel Poon & Co.**

Advocates & Solicitors  
Commissioners for Oaths

Daniel Poon Choon Kow  
LL. B. (Hons), LL.M

133 New Bridge Road  
#11-02 Chinatown Point  
Singapore 059413  
Tel: +65 6227-2469  
Fax: +65 6225-2579  
Email: law@dpco.com.sg  
(UEN: 53130838C)

Our Ref: DP.sl.isk.10522.18.JMW  
Your Ref: -----  
Please quote our reference number when replying

Date: 18 JUNE 2018

M/S AIG ASIA PACIFIC INSURANCE PTE. LTD.  
AIG BUILDING  
78 SHENTON WAY  
#08-16  
SINGAPORE 079120  
ATTN: MOTOR CLAIMS DEPARTMENT

FAX (6835-7416) ONLY

DEAR SIRs,

**PRE-REPAIR INSPECTION**

**YOUR INSURED VEHICLE REGISTRATION NO: SKT 6144T  
ACCIDENT ON 17 JUNE 2018 INVOLVING SFZ 7425D AND SKT 6144T  
AT 49D HOLLAND ROAD CARPARK**

We are instructed Vara Garcia Javier to notify you of a road traffic accident on 17<sup>th</sup> June 2018 at about 14:00 at 49D Holland Road carpark involving our client's vehicle registration number SFZ 7425D and vehicle registration number SKT 6144T driven by your insured at the material time. A copy of the Singapore accident statement /traffic police report filed is enclosed.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you would like to conduct a pre-repair inspection of the vehicle, by the attached list of ten (10) surveyor which our client deemed suitable to be appointed.

If the aforesaid is not agreeable, kindly therefore instruct your appointed surveyor for a pre-repair inspection of our client's vehicle at by making a prior appointment with the repairer stated below:-

M/S JEMENTAH MOTOR WORKS  
BLK 14 DEFU LANE 10  
# 01-406  
SINGAPORE 539195  
ATTN: AH CHUAN (9299-6636)

... 2/-

Page 2  
Messrs Daniel Poon & Co.  
Our Ref: DP.sl.isk.10522.18.JMW

---

Date: 18<sup>th</sup> June 2018

If we do not receive any agreement from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Yours faithfully,

A handwritten signature in black ink, appearing to be 'DP' followed by a flourish.

c.c. M/S JEMENTAH MOTOR WORKS

FAX (6285-7054) ONLY

## **SINGAPORE AUTOMOBILE APPRAISERS ASSOCIATION**

### **QUALIFIED MOTOR SURVEYORS**

- 1) ONG AH KENG, KENT
- 2) PHILLIP FOO
- 3) LEE KOK WENG
- 4) WINSON GOH
- 5) ALAN CHEONG
- 6) AMAS ONG POH MENG
- 7) SEBASTIAN LIM YONG TIAN
- 8) ANDREW HOW
- 9) DAVID PHOR
- 10) DAVE CHANG FUH KEONG

## 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	18/06/2018 08:08
Date Of Accident	17/06/2018 14:00
Exact Location Of Accident	49D HOLLAND ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFZ7425D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	VARA GARCIA JAVIER
NRIC No	G5473194P
Email Address	JAVIERVARA@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97320231
Alternative Phone No	OTHERS-97320231

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 1.8 A

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 CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA070983/1
Cover Note Number	

### Driver

Name of Driver	VARA GARCIA JAVIER
NRIC No	G5473194P
Date Of Birth	16/06/1973
Occupation	INDOOR
Date Of Driving Pass	20/09/2014
Driving Experience	3 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97320231
Fax Number	
Contact Number	OTHERS-97320231
Email Address	JAVIERVARA@YAHOO.COM

Address	11THOMSON LANE
Postcode	297727
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	COLLIDED INTO PARKED 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	
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)	0

#### Details of Police Action

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

#### Circumstances of Accident

PLEASE REFER TO 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	SKT6144T
Vehicle Make/Model/Colour	MAZDA / BIANTE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KARL TILKORN
NRIC/Passport Number	
Contact Number	97551019
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)

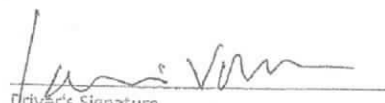
I understand, acknowledge, agree and consent that:

- (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.

  
Policyholder's Signature

Date & Time:

18/06/2018

  
Driver's Signature  
(If driver is not the policyholder)

Date & Time:

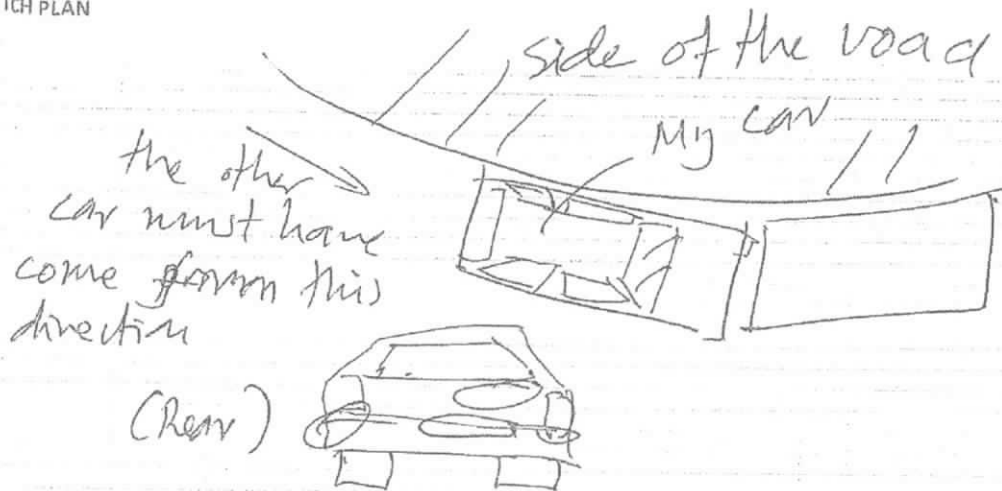
18/06/2018

  
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car was parked on the side of the car park. The other vehicle bumped into the back of my car, damaging the rear bumper and the back door, where clear scratches were left, as well as deeper damage below the door face.

I was not using the car at the time of the accident. The car was parked and the other party left a note on the windscreen which I saw upon my return.

DECLARATION

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

*[Signature]*  
Policyholder's Signature

Date & Time:

18/09/2018

*[Signature]*  
Driver's Signature  
(If driver is not the policyholder)

Date & Time:

*[Signature]*  
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

> **Back to OneMotoring**

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Foreign Identification Number
Owner ID:	3194P
<b>Vehicle Details</b>	
Vehicle No.:	SFZ7425D
Vehicle to be Exported:	No
Intended De-registration Date:	22 Jun 2018
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 A
Primary Colour:	Grey
Manufacturing Year:	2005
Engine No.:	1ZZ2341090
Chassis No.:	ZNE100259346
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$22,823.00
Original Registration Date:	27 Oct 2005
First Registration Date:	27 Oct 2005
Transfer Count:	2
Actual ARF Paid:	\$20,947.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	26 Oct 2020
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$30,721.00
COE Rebate Amount:	\$14,402.00
<b>Total Rebate Amount:</b>	<b>\$14,402.00</b>
<b>Message</b>	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 22 Jun 2018

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Toyota Wish

Price Range

Depreciation

> 10 year

Vehicle Type

Submit

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Home » Used Cars » 1axis » Toyota Wish 1.8A (COE till 12/2020)

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Compare

Toyota Wish 1.8A (COE till 12/2020)

- Overview
- Financial
- Accessories
- Similar
- Research
- Photos
- Map



- Add to Shortlist
- Add to Compare
- Add a Note
- Report Error
- More Actions
- Share

Car Details

Price	\$19,800	
Depreciation	\$7,850 /yr	?
Reg Date	30-Dec-2005 (2yrs 6mths 7days COE left)	
Manufactured	2005	?
Mileage	180,000 km (14.4k /yr)	
Transmission	Auto	
Engine Cap	1,794 cc	
Road Tax	\$1,264 /yr	?
Power	97.0 kW (130 bhp) View specs of the Toyota Wish (2008-2009)	
Curb Weight	1,300 kg	?
Features	1.8L 16 Valves VVT-i DOHC Engine, 132Bhp, Smooth Super 4 Speed ECT Steptronic Auto, Dual Airbags, ABS, Digital Auto Climate Control Aircon, Etc.	
Accessories	Sports Rims, Factory Fitted Audio System, Reverse Sensors, Electrical Retractable Side Mirrors, Upholstery Leather Seats, Etc.	
Description	Well Maintained By Previous Owner, Very Spacious And Big Boot Space. No Repairs Needed! Call Now For Viewing.	
COE	\$29,899	?
OMV	\$21,375	?
ARF	\$23,513	?
Dereg Value	\$15,089 as of today (change)	?
No. of Owners	3	?
Type of Veh	MPV	
Category	COE Car	
Availability	Available	

- Add to Shortlist
- Add to Compare
- Add a Note

Posted on: 21-Jun-2018 | Last Updated on: 21-Jun-2018  
Tags: Toyota Wish, 2005 Toyota Wish, Toyota, Wish, Used Toyota



Seller Information

Company	1axis
	» dealer's pricelist
	» 68 vehs sold   36 vehs available
Address	5 Yishun Industrial Street 1 #01-18 Search cars nearby this location
Location	North Spring Bizhub
Contact Person(s)	Jack 84306433 Kervin Chia 88113768 Edward Chen 81800536 Viki 90270337

SF27425D

A.C. P.S.

~~STOPS~~

4dy.

Rear windscreen sealant rec -  
Rear windscreen moulding rec -

Tailgate - Dented -

Tailgate Rear logo - rec -

Tailgate outer chrome - svc x

Rear bumper - DD/se -

Rear bumper side holder - rec -

Rear bumper bracket o/s Dented. l/c

set Rear bumper clips - rec

tail lamp o/s - cracked

tail lamp o/s - ?

Rear end panel - Repair

Rear exhaust - Repair

### ...CLAIM SUBFOLDER...(Pending for Survey Report)






































PRI






















CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	27 Jun 2018 <a href="#">Edit Reg</a>		18 Jun 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured:	<b>TILKORN KARL DIETRICH MARIA</b> , ID: C4VR36HPM								
Main Claimant:	<b>VARA GARCIA JAVIER</b> , ID: G5473194P								
Vehicle Reg. No.:	<b>SFZ7425D</b>	Date of Loss:	17/06/2018 14:00 - :59 [151 Months and 21 Days From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP / 6938470927SG</b>	Policy/Cover Note No.:	2100417667 (Comprehensive)						
Vehicle Reg. No. (Insured):	<b>SKT6144T</b>	Policy No. (Claimant):							
		Excess:							
Repairer:	<b>Jementah Motor Works - Defu Lane (HQ)</b> BLK 14 DEFU LANE 10 #01-406, 539195 Defu Lane - Tel: 9299 6636								
Handling Insurer:	<b>AIG Asia Pacific Insurance Pte. Ltd. (Express)</b> - Tel: 65-6419-3000 ... [Handled by <b>Lee, Ming-Yao</b> ] MingYao.Lee@aig.com								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>MARCUS CHUA</b> ] ... [Final Rpt due 04/07/2018]								
Claimant's Solicitor:	<b>Daniel Poon &amp; Co</b>								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
<ul style="list-style-type: none"> <li>AIG_SG (27/06/2018): Request To Upload TP GIA Report</li> </ul>									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*SFZ7425D (6938470927SG)**  
**[SKT6144T]**  
**TP**  
**VARA GARCIA JAVIER**  
**Jun 17 2018 2:00PM**  
**[TILKORN KARL DIETRICH MARIA]**  
**Jementah Motor Works - Defu Lane**

Upload Documents			Upload Photos		Compose New Letter		Upload Video		Upload Audio		View		View in Browser	
Photos/Images												3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)											Thumbnail	Print
1	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
2	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
3	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
4	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
5	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
6	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
7	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
8	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
9	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
10	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
11	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
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35	26/06/18 13:51	General View											Load JPG	<input checked="" type="checkbox"/>
36	23/07/18 10:21	Photo After Spray											Load JPG	<input checked="" type="checkbox"/>
37	23/07/18 10:21	Photo After Spray											Load JPG	<input checked="" type="checkbox"/>

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57	23/07/18 10:21	Photo After Spray	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	AIG Asia Pacific Insurance Pte. Ltd. (SG)	Thumbnail	Print
1	27/06/18 09:58	OI GIA REPORT	 Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>			



## 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: CS3/AIG18011091/UZ4D3E2

Date: 24/07/2018

## REFERENCE

Handling Insurer: AIG Asia Pacific Insurance Pte. Ltd. Policy No: 2100417667  
**Claimant Vehicle No :** SFZ7425D **Insured Vehicle No :** SKT6144T  
 Date of Loss: 17/06/2018 Nature of Claim: TP Claim No: 6938470927SG

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: **SFZ7425D**  
 Make & Model: TOYOTA WISH, 1.8 (A) Engine No: 1ZZ2341090  
 Reg. Date: 27/10/2005 (Man. Year: 2005) Chassis No: ZNE100259346  
 Colour: Grey Odometer: 160173 km  
 Engine Capacity: 1794 cc  
 Market Value/New Car Price: N/A  
 Sum Insured (\$\$): **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: Yes

## CONDITION OF TYRES

Front Tyre Size: 195/60 R15 Rear Tyre Size: 195/60 R15  
 Front Left Side: Yokohama 5 mm Rear Left Side: Yokohama 5 mm  
 Front Right Side: Yokohama 5 mm Rear Right Side: Yokohama 5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (\$\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment: 18/06/2018  
 Date Inspected: 22/06/2018 Inspected At: Jementah Motor Works - Defu Lane (HQ)  
 BLK 14 DEFU LANE 10 #01-406  
 Singapore 539195  
 Estimated Period of Repair: 4.0 days

Adjuster: MARCUS CHUA

Manager: Ho Zhao Tian

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

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR WINDSCREEN SEALANT	Necessary	0.00 F	*- F
2	1		*REAR WINDSCREEN MOULDING	Necessary	0.00 F	*- F
3	1		*TAILGATE	Dented	0.00 F	*- F
4	1		*TAILGATE REAR LOGO	Necessary	0.00 F	*- F
5	1		*TAILGATE OUTER CHROME	Serviceable	0.00 F	*- F
6	1		*REAR BUMPER	Dented / Deformed	0.00 F	*- F
7	1		*REAR BUMPER SIDE HOLDER	Necessary	0.00 F	*- F
8	1		*REAR BUMPER BRACKET O/S	Dented	0.00 F	*- F
9	1		*SET REAR BUMPER CLIPS	Necessary	0.00 F	*- F
10	1		*TAILLAMP N/S	Cracked	0.00 F	*- F
11	1		*TAILLAMP O/S	* Check	0.00 F	*- F
12	1		*REAR END PANEL	Repair	0.00 F	*- F
13	1		*REAR EXHAUST	Repair	0.00 F	*- F
F=Franchise part.						
Total Parts (\$\$)					0.00	0.00

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >