

22/03/2002

ASS. REC. BY:

REF: CS3/ EGI18011470/Gz4d302

Special Instruction: ✓

Surveyor: GUD Diany

ASSIGNMENT (Office)

From (Person): Siti A' thikah

of EGI

Date/Time: 25/6/18 @ 11.25am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SKE 4607S

Insured: GBB 3080 P

at Workshop m/s Heng Kee Works hop

Tel: 9666 3922

of Blk 1033, Euros Ave SA #01-30

Policy No:

Claim No: GBB 3080 P / RH / pl

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 14/06/2018

27/06/2018 @ 2pm

CA / REV / REP. / REV 24 HRS up

H.O.D. Endorsement:

Date/Time: 11:44am @ 25/6/18

Person Contacted: irwan

Vehicle IN / OUT

Date/Time

Action/Instruction (X) Estimate

SKE 4607S - X

GBB 3080 P - Nst INCO9003302 / Awl

DOA: 01/01/2022

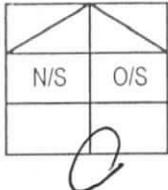
(08/11/13) wef PRS
AGS. REC. BY: Shel

REF: EGI

ASSIGNMENT

From: _____ Date: 27/6/2018
Estimated Cost: _____
OD: TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SKE 4607S
at Workshop m/s Heng Kee Workshop
of Blk 1033, Eunus Ave SA #01-30
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: _____
(Client's Record) 2pm @ owner waiting
Make of Veh: _____

(Policy Condition)
Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: _____
IDAC Accident Rpt: _____ Consistent?: Yes or No
GIA / PR Seen: _____ Consistent?: Yes or No
Est. Repairs: 5 days Res.: Yes or No
Lum Sum: 20 % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS (up)
Date: _____ Person Contacted: _____
Vehicle: IN / OUT

Veh No: SKE 4607S Yr Regn: MGR 1 2012
Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Toyota AX10 c.c. 1496
Colour: Beige A/C: Insured / Std / NI / NA
Sp. Reading: 1613 40 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: NZE1416117976
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Modi: N/S / S/Rim / STD A/Rim or
Tyre Size: F: 185/70 R14
R: 11
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or
Front Rear
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.I. 27-06-18
Survey held at w/s 2pm
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>\$4000 - \$5000</u>
<u>29/6/18</u>	<u>Submit PRS Report</u>

Date/Time, File Pass to? : Preli. Report
1) : Final Report
Date/Time, File Return to?

2) _____
Report Format : _____
Lump Sum / I.B.I.: (\$ _____)

Days Of Repair: _____
Resurvey No. of Trip: _____
Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)

Survey Fee:	<u>50</u>
Transportation:	_____
_____ S + RS, _____ SI	_____
Photos	_____
Others	_____
TOTAL	<u>50</u>

Nivitha (LKK Auto)

From: Siti A Thikah AB Rahman <siti.rahman@ergo.com.sg>
Sent: Monday, 25 June 2018 11:25 AM
To: Catherine Chong (LKK Auto) (admin-d@lkkauto.com)
Cc: Catherine Chong (LKK Auto) (admin-d@lkkauto.com); SUR; Survey Report (ERGO Insurance Pte. Ltd.)
Subject: OI: GBB 3080P | TP: SKE 4607S | LKK | DOA: 14.06.2018 - PRI | OUR REF:GBB3080P/RH/pl(sa)
Attachments: SKE4607S - PRS FORM.pdf

Dear Catherine,

With reference to the above matter.

We have rejected to their PRS list, please assist to conduct this survey request from Kertar & Sandhu, their client's vehicle can be survey at:-

Address: Blk 1033, Eunost Ave 5A, #01-30

Singapore 409703

Contact Person / HP: Mr Irwan / 9666 3922

Attached are the necessary documents for your further actions (**Note: Our insured has yet to lodge accident report to us**).

Note: To survey on without prejudice basis and inform the repairer in writing, that you are require to conduct a post-repair inspection before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Kindly acknowledge receipt of this email.

NOTE: Please assist to quote our ref as the subject matter, when forwarding the Preliminary Reports / Survey Reports.

Thank you.

Warmest regards

Siti A'thikah

Claims Department

ERGO Insurance Pte. Ltd.

5 Temasek Boulevard

#04-01 Suntec Tower Five

Singapore 038985

Tel.: 65 6829 9170

Website: www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.

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Date: 20.06.2018
Our Reference: GBB 3080P/RH/pl
Your Reference: SKE 4607S

To: KERTAR & SANDHU

Sent via Fax

6557 0313

or

Email

Pre-Repair Survey (PRS) Acknowledgement

Vehicle For Inspection: SKE 4607S
Insured's Vehicle: GBB 3080P
Date Of Accident: 14.06.2018

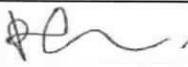
We acknowledge receipt of your request for PRS on: 20.06.2018

In compliance with "State Courts Practice Directions Amendment No.1 of 2016", do select an assessor from the list below and indicate your selection in the box marked *.

*

AIS	Automobile Inspection Services Pte Ltd	LBS	L.B.S Auto Consultants Pte Ltd
FTA	FormTeam Consultancy Pte Ltd	LKK	LKK Auto Consultants Pte Ltd
IAS	Infiniti Appraisal Service	PS	Priority Services
JPK	JP Knights Pte Ltd	VAC	Vicom Ltd

- Your request for inspection does not have your client's cost of repair estimate, kindly forward a copy.
- Your request for inspection does not have your client's GIA report as indicate in your fax, kindly forward a copy.
- We acknowledge your interest for direct settlement, we will assess & revert soon upon receipt of estimate.
- Our Insured's driver has not reported the accident to us todote.
- Others: OFFICER-IN-CHARGE - ROHAINI

Prepared by:		Pei Li	6829 9194	claims@ergo.com.sg
Signature:				FAX : 6829 9247

Assessor use only:

Assignment Date: _____
Assignment Time: _____

Remarks:

Workshop use only:

Assessor attended workshop on:

Date: _____
Time: _____
Inspector: _____

Vehicle not available at the appointed date and time.

Kindly acknowledge our Assessor presence for the above job .

Workshop Acknowledgement & Stamp.

Note: Our Inspection is on a without admission to liability basis.



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

ERGO INSURANCE PTE LTD

Ref : CS3/EGI18011470/Gz4d3

5 TEMASEK BOULEVARD
#04-01 SUNTEC TOWER FIVE
SINGAPORE 038985

Date : 25-06-2018



Code : EGI

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	GBB 3080P	Veh. Inspected	SKE 4607S
Policy No.		Coverage (\$)	0.00
Claim No.	GBB3080P/RH/pl	Excess (\$)	0.00
Assign From	YEE PEI LI	Assign Date	25/06/2018

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	14/06/2018	Inspection Date	27/06/2018
Survey held at	HENG KEE WORKSHOP 1033 EUNOS AVENUE 5A #01-31 EUNOS INDUSTRIAL ESTATE SINGAPORE 409703		

5a. Remarks

<p>A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.</p>
--

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 18:05
Date Of Accident	14/06/2018 17:30
Exact Location Of Accident	BEACH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE4607S
Insured/Policyholder	
Name Of Registered Owner	GENCARS PTE LTD
Co Reg No	199301816E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68441616

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO-1.5 (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 HIRE

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	CHOR TONG SENG
NRIC No	S1425798E
Date Of Birth	23/11/1960
Occupation	OUTDOOR
Date Of Driving Pass	03/08/1983
Driving Experience	34 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92453399
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address 134A SIMS AVE
 Pbstcode 387456
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - RENTAL
 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
 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) 3
 Passenger 1
 NAME: : TBA
 GENDER: : MALE
 Passenger 2
 NAME: : TBA
 GENDER: : MALE

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 POLICE REPORT

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 GBB3080P
 Vehicle Make/Model/Colour OPEL
 Details Of Properties VEH B
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver KOH SONG FA IVAN
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name

Nature Of Damage

Nb. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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:

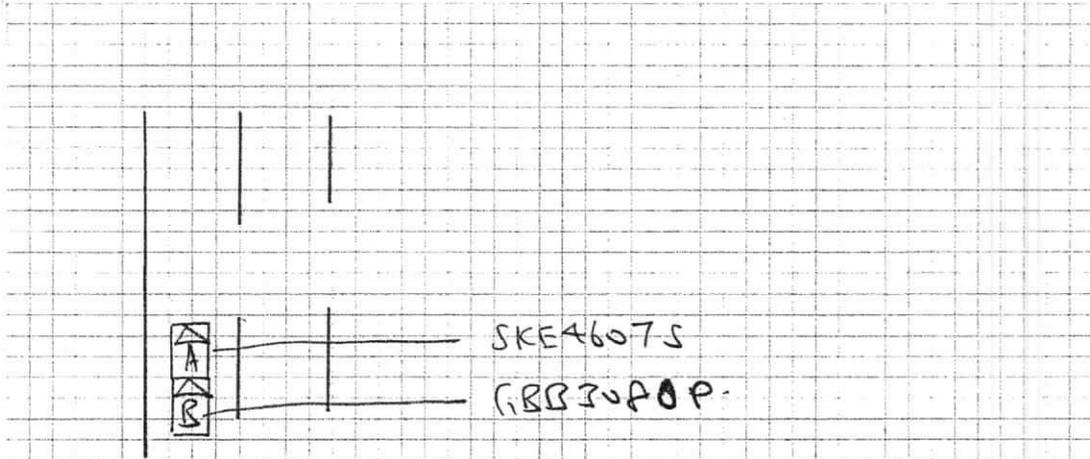
Choo

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

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.

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)


Reporting Centre Personnel's Signature
Name:



**SINGAPORE
POLICE FORCE**



T/20180615/2073

1 of 3

Police Station Of Origin:
Mountbatten NPP
60 Dakota Crescent #01-213 SINGAPORE
390060
Tel No: 1800-3449999

Report No. T/20180615/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/06/2018 18:02	Vide Report No.:	Station Diary No.: 24
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Informant's Particulars			
Name of Informant: CHOR TONG SENG		Address: 134A SIMS AVENUE SINGAPORE 387456	
ID Type / ID No.: NRIC NO / S1425798E		Contact No.: Home/Office: Mobile: 9245 3399	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 57	Date of Birth: 23/11/1960	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/06/2018 17:30	Type of Location: X-Junction
Location: Along Road 1 BEACH ROAD INFRONT OF PARK ROYAL HOTEL, ALONG BEACH ROAD JUNCTION OPHIR ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBB3080P	Van	OPEL	COMBO-C 1.3DTJ MTA E4	Red	Slightly Damaged	0
SKE4607S	Car	TOYOTA	COROLLA AXIO 1.5X A	Silver	Slightly Damaged	2

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180615/2073

Police Station Of Origin:
Mountbatten NPP
60 Dakota Crescent #01-213 SINGAPORE
390060
Tel No: 1800-3449999

2 of 3

Report No. T/20180615/2073

CONTINUATION OF REPORT

Driver			
Name	KOH SONG FA IVAN		ID No. S8823873E
Related Vehicle	GBB3080P (Van)		Contact No. 9180 7877
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	CHOR TONG SENG		ID No. S1425798E
Related Vehicle	SKE4607S (Car)		Contact No. 9245 3399
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

Brief Details.

On the 14/06/2018 at about 1730hrs, I was driving along Beach Road in my vehicle, SKE4607S. I had just picked up 2 passengers from Golden Mile Tower and was headed towards 160 Robinson Road, Singapore Business Federation. When at the junction of Beach Road and Ophir Road, my vehicle had come to a stop as the traffic light was red. My vehicle was the third or fourth vehicle at the junction. After a few seconds, I suddenly felt an impact from my vehicle's rear. I then got out of my vehicle and noticed that a red van, GBB3080P, had collided into the rear of my vehicle.

I then asked the other driver on how is he going to compensate for the accident and he inform me that he is going to lodge a police report as it is a company van and to settle the matter through insurance. I wish to state that, I am lodging this report for insurance claim purposes.



SINGAPORE
POLICE FORCE



T/20180615/2073

Police Station Of Origin:
Mountbatten NPP
60 Dakota Crescent #01-213 SINGAPORE
390060
Tel No: 1800-3449999

3 of 3

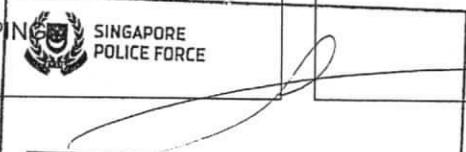
Report No. T/20180615/2073

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 SIM SENG ZHI, JORDAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 15/06/2018 18:02
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PIN Contact No.: 65476430	Classification Of Case:
Authentication Stamp NP168	

> [Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details

Vehicle No. :	SKE4607S
Vehicle Type :	Z10 - Private Hire (Chauffeur) Motor Car
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	TOYOTA
Vehicle Model :	COROLLA AXIO 1.5X A
Chassis No. :	NZE1416117976
Propellant :	Petrol
Engine No. :	1NZD402332
Engine Capacity :	1496 cc
Maximum Power Output :	81.0 kW (108 bhp)
Maximum Laden Weight :	1405 kg
Unladen Weight :	1130 kg
Year Of Manufacture :	2009
Original Registration Date :	01 Mar 2012
Lifespan Expiry Date :	-
COE Category :	A - Car (1600cc & below)
Quota Premium :	\$52,809.00
COE Expiry Date :	28 Feb 2022
Road Tax Expiry Date :	31 Aug 2018
PARF Eligibility Expiry Date :	28 Feb 2022
Inspection Due Date :	28 Feb 2019
Intended Transfer Date :	15 Aug 2018
CO2 Emission :	-
CO Emission :	-
HC Emission :	-
NOx Emission :	-
PM Emission :	-

The current road tax expiry is 31 Aug 2018. You may renew the road tax from 01 Jun 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 31 Aug 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable (From 01 Sep 2018 to 28 Feb 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	341.00	-	341.00
Total Amount Payable :			366.00

Amount Payable (From 01 Sep 2018 to 31 Aug 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	682.00	-	682.00
Total Amount Payable :			707.00

You may print this page for reference.

OK

Print



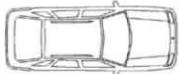
LKK Auto Consultants Pte Ltd

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 1

PRE-REPAIR INSPECTION REPORT				
ERGO INSURANCE PTE LTD		Ref: CS3/EGI18011470/Gz4d3e2		
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER		Date: 16-08-2018		
FIVE SINGAPORE 038985		Code: EGI		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	GBB 3080P	Veh. Inspected	SKE 4607S	
Policy No.		Coverage (\$)	0.00	
Claim No.	GBB3080P/RH/pl	Excess (\$)	0.00	
Assign From	YEE PEI LI	Assign Date	25/06/2018	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA AXIO	c.c	1496	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	NZE1416117976	Colour	BEIGE	
Odometer	161340 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	185/70 R14	BRIDGESTONE	6 mm	
L/H Front Tyre	185/70 R14	BRIDGESTONE	6 mm	
R/H Rear Tyre	185/70 R14	BRIDGESTONE	6 mm	
L/H Rear Tyre	185/70 R14	BRIDGESTONE	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
5. General Information				
Accident Date	14/06/2018	Inspect Date / Time	27/06/2018 (02:00 PM)	
Survey held at	HENG KEE WORKSHOP 1033 EUNOS AVENUE 5A #01-31 EUNOS INDUSTRIAL ESTATE SINGAPORE 409703			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$4,000-\$5,000				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		5 Working Days		

Report Ref No. CS3/EGI18011470/Gz4d3e2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE, MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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