

Surveyor

REF: CS3 / III18008583 / UT6-9

Special Instruction:

US: # 4700.00

From (Person): Daniel Poon of III ASSIGNMENT (Office) Date/Time: 04072018  
Estimated Cost: Bill to:

Third Parties:

Claimant:

Surveyor: MC-COY Appraiser

Workshop: Blunel Automotive

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SKZ 3361X Insured: SHD 7161G

at Workshop m/s Blunel Automotive Tel: 6785 2088

of Blk 1 Keki Bukit Ave 1 #01-55

Policy No: Claim No: MCT18040843

Sum Insured: Excess:

Make of Veh: D.O.A. 30042018

(Client's Record)

07.07.2018 (Monday) @ 1.15pm

H.O.D. Enforcement/Date:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time: 23/7/18 Confirmed with Final Fig days (Red \$ / %; Original 4 days)

Date/Time: 23/7/18 Submit Final Fig \$ 3800, 4 days (Red \$ 900 / 19 %; Original 4 days)

Date/Time	Action/Instruction
	SKZ 3361X - CS3 / III18008583 / UT6-9
	SHD 7161G - COY / III18008583 / UT6-9

*[Signature]*  
24/7/2018

RECEIVED 25 JUL 2018

Para(1) : Parts found not replaced (To highlight R or UB, LR, Etc)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

Para(3) : Nett Value

Market Value : \_\_\_\_\_

Salvage Value : \_\_\_\_\_

Nett Value : \_\_\_\_\_

Inspected/  
Evaluated by:

Fee Charged:

Basic & Add  
Transport  
Photos  
Others  
Total

Date

290
250

1) Date/Time 25/7/18 File Pass to TYPIST

3) Date/Time File Pass to

5) Date/Time File Pass to

2) Date/Time File Return to

4) Date/Time File Return to

6) Date/Time File Return to



**Catherine Chong (LKK Auto)**

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**From:** Olivia Lau (LKKAuto) <olivialau@lkkauto.com>  
**Sent:** Wednesday, 4 July, 2018 10:02 AM  
**To:** assignments  
**Cc:** Admin A  
**Subject:** [III]: Arrange TP RI - MCT18040843

Hi Cath / Nivitha,

Please. Thanks.

Best Regards,

Olivia Lau

LKK Auto Consultants Pte Ltd

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**From:** Pooi Chin Han Daniel <danielpooi@iii.com.sg>  
**Sent:** Wednesday, July 4, 2018 9:57 AM  
**To:** Olivia Lau (LKKAuto); Mekavathanan Sarangapani; Zuhaidah Samsuri; Joel Nah Shern Ern  
**Subject:** RE: our ref : MCT18040843

Dear Olivia,

Third party lawyer has responded with the following.

As requested, we have made an arrangement for our client's vehicle **SKZ 3361X** to be available for re-inspection on:

**Date** : 9 July 2018 (Monday)  
**Time** : 1.15 pm  
**Venue** : Bluwel Automotive Service Pte Ltd  
1 Kaki Bukit Avenue 6, #01-55, Autobay@Kaki Bukit  
**Contact** : Ms Sally @ 6745-2088

Please kindly arrange for the physical inspection and please acknowledge this email.

Daniel Pooi

**Motor Claims Department**

**India International Insurance Pte Ltd**

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 202 Fax: 6224 4174

*S&P 'A-' (stable) rated Company*



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**From:** Mekavathanan Sarangapani

**Sent:** Tuesday, 3 July, 2018 3:18 PM

**To:** Zuhaidah Samsuri <aida@iii.com.sg>; Joel Nah Shern Ern <JoelNah@iii.com.sg>; Pooi Chin Han Daniel <danielpooi@iii.com.sg>

**Cc:** Olivia Lau (olivialau@lkkauto.com) <olivialau@lkkauto.com>

**Subject:** our ref : MCT18040843

Physical Inspection carried out yet ? or date , venue fixed ?

Meka

Claim Audit	History Checking	Activity Log	Documents
Edit/Assign Claim	Assign Solicitor	File Review	Adj Market Value
Send Back Adj Rpt	Wait for Documents	Revert for Inhouse Survey	Send RI/Rpt-for-Repairer
Make Offer >>			

CLAIM SUBFOLDER TRACKING				
Case	Notified	Est Submitted	Adj Assigned	Adj Submitted
Main	14 May 2018		03 May 2018 00:00	17 May 2018 09:32 S\$0.00 (S\$181.90)

Main	Offer Processing	Claim Details	Adjuster's Details
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CLAIM SUBFOLDER DETAILS				[Created by a]
Insured:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R			
Main Claimant:	LEE YUET LI, ID: S7835299Z			
Vehicle Reg. No.:	SKZ3361X	Date of Loss:	30/04/2018 12:00 [27 Months and	
Claim Type:	TP / MCT18040843	Policy/Cover Note No.:	MCOM0016	
Vehicle Reg. No. (Insured):	SHD7161G	Policy No. (Claimant):		
		Excess:		
Repairer:	Bluwel Automotive Service Pte Ltd (HQ) <b>PROFILE</b> 1 Kaki Bukit Avenue 6, #01-28/37/53/55/56 67452088			
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Zuhaidah Bte San]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Fina]			

CLAIM REGISTERED			
Clm. No (Clm Reg Date)	MCT18040843 (22/06/2018)		Intimation (Notify Date)
Registration Type	[Manually registered]		Claim Status
Incurred	TP		
S\$	0.00		

## **Pooi Chin Han Daniel**

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**From:** Pooi Chin Han Daniel  
**Sent:** Monday, 25 June, 2018 9:41 AM  
**To:** 'Igene Lim'  
**Cc:** Zuhaidah Samsuri; Mekavathanan Sarangapani  
**Subject:** India Ref: MCT18040843 Your Ref: MN.IG.B1.1812388.st

Without Prejudice Save as to Cost

Dear Sir

We refer to the above accident and your letter dated **21.6.18**

We wish to conduct re-inspection on your client's vehicle.

Please advise the date, time and venue (1) week in advance so as to enable us to make the n for survey.

*Daniel Pooi*

**Motor Claims Department  
India International Insurance Pte Ltd**

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 202 Fax: 6224 4174

**S&P 'A-' (stable) rated Company**



Best Regards,

Mekavathanan

HOD

**Motor Claims Department**

**India International Insurance Pte Ltd**

64 Cecil Street, #04/#05 IOB Building, Singapore 049711

DID: 6347 6105 Fax: 6224 4174

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.

**DISCLAIMER:**

This email is intended solely for the person to whom it has been addressed.

It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached 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.

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

India International Insurance Pte Ltd.

Registration No. 198703792-K

1	Reserves		
	TPPI	PRESERVE	6K
	SUBRO	PRESERVE	PC - DC
	Investigation Fees		300.00
	Legal Fees		
2	Fraud Check		
3	Unpaid to business		
4	Grant Rights	✓	
5	Payment		

DATE OF ACCIDENT	NCH 804 0145 3/4/18
CLAIM OFFICER	25 SP / SN / NL / MP / WH
LOD FROM	M N B J N Mahan PCJ
FAX	YES / DATE: 22/10/18
INSURED VEHICLE	SH01161G
TYPE OF CLAIMANT	DRIVER / PASSENGER (IV) / PASSENGER (TP) / RIDER / PILION / CYCLIST / PEDESTRAIN / COMPANY / OWNER Lee Yung Li
TYPE OF CLAIM	TPD / TPI / UL / SUBRO / TPPD SK23361X
CASE TYPE	DC / PC / NC / REOPEN
PREMIUM LIVE UPDATED	YES / DATE:
FIRST LETTER	TO BE DONE / EXISTING / NA
TPD BILL MUST BE TAKEN OUT AND PLACED BEHIND THE LOD	ARRANGED / CHECKED / NA
MERIMEN SCAN	YES / DATE:
RIGHTS GRANTED	NOT NEEDED / YES / DATE:
MERIMEN COMPLETED	YES / DATE:

\*\*\*\*\*  
\*\*\* FAX TX REPORT \*\*\*  
\*\*\*\*\*

TRANSMISSION OK

JOB NO. 1679  
DESTINATION ADDRESS 965098482  
SUBADDRESS  
DESTINATION ID  
ST. TIME 22/06 08:57  
TX/RX TIME 00' 22  
PGS. 1  
RESULT OK

FAXED  
22 JUN 2018  
MOTCLM DEPT

# M NEDUMARAN & CO

*SKH MC*  
*(30)* *4w*

Advocates & Solicitors  
Commissioner for Oaths

UEN NO. 53181067D

Please reply to our Branch Office for this matter

Nedumaran Muthukrishnan  
LLB (hons) [Buckingham]  
Barrister at Law (Lincoln's Inn)



Branch Office: No. 11 Sin Ming Road  
#B2-09 (Unit 2) Thomson V Two  
Singapore 575629  
Tel : 6509-8480 / 6509-8481  
Fax : 6509-8482  
Email : [lgene.lim@mneduco.com.sg](mailto:lgene.lim@mneduco.com.sg)

Our Ref : MN.IG.B1.1812388.st  
Your Ref : SHD 7161G

21<sup>st</sup> June 2018

INDIA INTERNATIONAL INSURANCE PTE LTD  
64 Cecil Street,  
#04/06-00, IOB Building  
Singapore 049711

"WITHOUT PREJUDICE"  
BY HAND  
We are in receipt of your letter of the 14th June 2018 which is receiving our attention. We shall revert shortly. Kindly note that we are preserving our rights to conduct a medical re-examination on your client where necessary.  
Our Ref: *MCT/18040843*  
Name :  
Date :  
Indo International Insurance P.L.

*(PC)*

COMFORT TRANSPORTATION PTE LTD  
383 Sin Ming Drive  
Gas Building  
Singapore 575717

CERTIFICATE OF POSTING  
(for your information only)

*22/6/2018*

Dear Sir,

CLAIMANT : LEE YUET LI  
ACCIDENT ON 30/04/2018 INVOLVING VEHICLES NO. SKZ 3361X AND SHD 7161G ALONG PARAGON ENTRANCE TO DRIVE WAY AT ABOUT 1255 HOURS

We act for MS LEE YUET LI, who was the owner of vehicle no. SKZ 3361X.

We are instructed by the above named to claim damages against you/your insured in connection with a road traffic accident on 30/04/2018 ALONG PARAGON ENTRANCE TO DRIVE WAY involving our client's vehicle registration number SKZ 3361X and vehicle registration number SHD 7161G driven by you/your insured at the material time.

# M NEDUMARAN & CO

Advocates & Solicitors  
Commissioner for Oaths

UEN NO. 53181067D

Please reply to our Branch Office for this matter

Nedumaran Muthukrishnan  
LLB (hons) [Buckingham]  
Barrister at Law (Lincoln's Inn)



Branch Office: No. 11 Sin Ming Road  
#B2-09 (Unit 2) Thomson V Two  
Singapore 575629  
Tel : 6509-8480 / 6509-8481  
Fax : 6509-8482  
Email : [igene.lim@mneduco.com.sg](mailto:igene.lim@mneduco.com.sg)

Our Ref : MN.IG.B1.1812388.st  
Your Ref : SHD 7161G

21<sup>st</sup> June 2018

INDIA INTERNATIONAL INSURANCE PTE LTD  
64 Cecil Street,  
#04/06-00, IOB Building  
Singapore 049711

COMFORT TRANSPORTATION PTE LTD  
383 Sin Ming Drive  
Gas Building  
Singapore 575717



PC

Dear Sir,

**CLAIMANT : LEE YUET LI**  
**ACCIDENT ON 30/04/2018 INVOLVING VEHICLES NO. SKZ 3361X AND SHD 7161G ALONG PARAGON ENTRANCE TO DRIVE WAY AT ABOUT 1255 HOURS**

We act for **MS LEE YUET LI**, who was the owner of vehicle no. **SKZ 3361X**.

We are instructed by the above named to claim damages against you/your insured in connection with a road traffic accident on **30/04/2018 ALONG PARAGON ENTRANCE TO DRIVE WAY** involving our client's vehicle registration number **SKZ 3361X** and vehicle registration number **SHD 7161G** driven by you/your insured at the material time.

We are instructed that the accident was caused by you/your insured's negligent driving and /or management of your/your insured vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

01. Cost of Repair (inclusive of GST)	S\$ 5,029.00
02. Loss of Use for 4 days + 1 PH @ \$140.00 per day	S\$ 700.00
03. Pre-Repair Survey Loss of Use for 2 days	S\$ 280.00
04. Survey report fee	S\$ 644.00
05. GIA search/report & LTA search fees	S\$ 36.49
06. Costs & Incidentals	<u>S\$ 1,060.00</u>
	<b><u>S\$ 7,749.49</u></b>

$7M \neq 3r$   
SE 4000

## M NEDUMARAN & CO

Advocates & Solicitors  
Commissioner for Oaths

Page 2

Our Ref : MN.IG.B1.1812388.st

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We enclose a copy of each of the following documents for your consideration:-

- (a) GIA report lodged by drivers of SKZ 3361X & SHD 7161G;
- (b) LTA Search;
- (c) Enquire Transfer fee;
- (d) Final Repair Bill;
- (e) Surveyor's report & invoice and
- (f) **84 black and white photographs** depicting the damages to motor vehicle SKZ 3361X.  
[coloured-print photos will be forwarded to insurance company upon request]

The demand herein is in respect of our client's claim for damages pertaining to his motor vehicle and any settlement following or subsequent to this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to his personal injuries.

**Please note that a Notice of accident dated 3<sup>rd</sup> May 2018 was sent to your insurers. A pre-repair survey on our client's damaged vehicle was carried out by your insurer's appointed surveyor on 10/5/2018, 11/5/2018 & 15/5/2018.**

Please also note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.

Please note that you or your insurer should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim herein is quantified based on supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully,

M NEDUMARAN & CO

NEDUMARAN MUTHUKRISHNAN  
(Branch Office)

Encls

cc. Client (By Fax 6841-2088 Only) – SKZ 3361X

## 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 willful 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	30/04/2018 15:21
Date Of Accident	30/04/2018 12:55
Exact Location Of Accident	PARAGON ENTRANCE TO DRIVE WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ3361X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE YUET LI
NRIC No	S7835299Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96905533
Alternative Phone No	OFFICE-96905533
<b>Vehicle Particulars</b>	
Manufacturer	MAZDA
Model	5
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?	NO
If No, Please state action to be taken	THIRD PARTY.
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5077126763-02
Cover Note Number	
<b>Driver</b>	
Name of Driver	MERVYN HENG CHIN-YEONG
NRIC No	S7702375E
Date Of Birth	26/01/1977
Occupation	INDOOR
Date Of Driving Pass	15/07/2003
Driving Experience	14 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97420374
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 12C HOUGANG STREET 11  
#06-68

Postcode 534072

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HUSBAND

Vehicle Registration Number of Driver's Own Vehicle -  
-  
-

Insurance Company of Driver's Own Vehicle -  
-  
-

**General Information of the Accident**

Type Of Accident SIDE SWIPE

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 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 SHD7161G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver LAI LEOK SHEN

NRIC/Passport Number

Contact Number 96197050

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### 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 company.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers to the GIA Reclaim 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 detect or 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;
  - (ii) regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
  - (iii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time

30/4/2018

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

Date & Time

30/4/2018

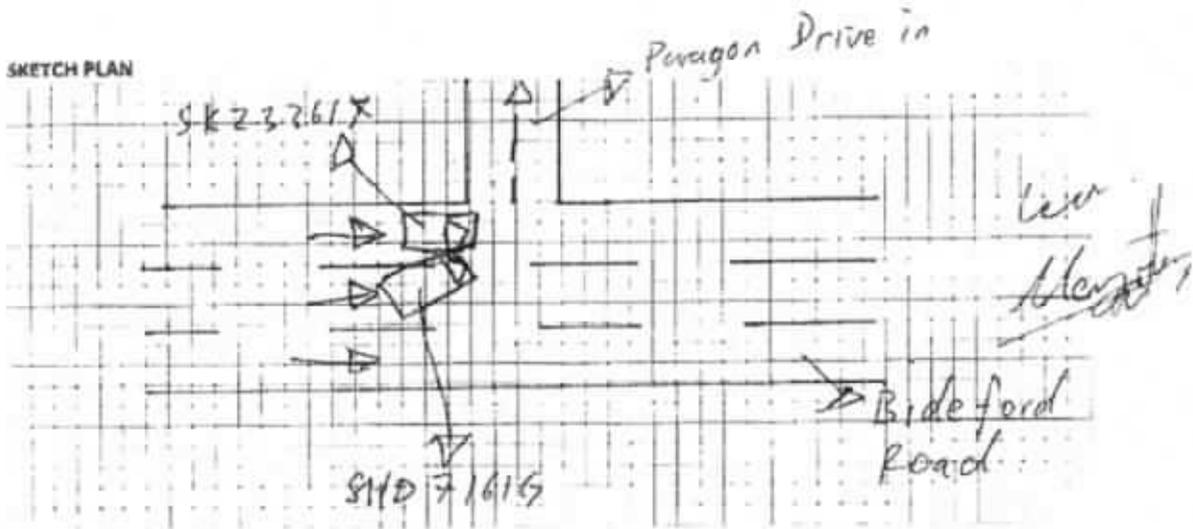
Reporting Centre Personnel's Signature

Name

NRIC/FIN No

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was waiting to turn into Paragon. I was stationary, taxi turn into my lane from 2 lane and bang my right front portion and rim. My car has in-car camera.

*Menzies*

DECLARATION

We declare the foregoing particulars are true in every respect

*Lee*  
 Policyholder's Signature  
 Date & Time: 30/4/2018

*Menzies*  
 Driver's Signature  
 (if driver is not the policyholder)  
 Date & Time: 30/4/2018

*[Signature]*  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No:



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

SEARCH RESULTS

Our Ref No: GR-18-066474
Date of Request: 03/05/2018

Your Ref No: MN.IG.B1.1812388

M NEDUMARAN & CO
No. 11 Sin Ming Road
#B2-09 (Unit 2), Thomson V Two
Singapore 575629

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 30/04/2018
Location of Accident: PARAGON ENTRANCE TO DRIVEWAY
Client Vehicle No: SKZ3361X

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

Table with 3 columns: REQ. VEHICLE, ACCIDENT LOCATION, ACCIDENT DATE. Row 1: SHD7161G, BIDEFORD ROAD TWDS PARAGON TAXI STAND, 30/04/2018 12:40

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.


**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
 Phone: +65 6224 0010 Fax: +65 6224 0030  
 Operating Hours: Monday to Friday 9am to 5pm  
 GST Registration No: M400017735

RECORDS MANAGEMENT CENTRE

**TAX INVOICE**

Our Ref No: GR-18-066474  
 Date of Request: 03/05/2018  
 Your Ref No: MN.IG.B1.1812388

M NEDUMARAN & CO  
 No. 11 Sin Ming Road  
 #B2-09 (Unit 2), Thomson V Two  
 Singapore 575629

Dear Sir/Madam,

**Your Search Criteria:**

Date of Accident: 30/04/2018  
 Place of Accident: PARAGON ENTRANCE TO DRIVEWAY  
 Client Vehicle No: SKZ3361X

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

 GIRO  Cash  Cheque



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-066475
Date of Request: 03/05/2018

Your Ref No: MN.IG.B1.1812388

M NEDUMARAN & CO
No. 11 Sin Ming Road
#B2-09 (Unit 2), Thomson V Two
Singapore 575629

Dear Sir/Madam,

Date of Accident: 30/04/2018
Vehicle No: SKZ3361X
Place of Accident: PARAGON ENTRANCE TO DRIVE WAY
Involving Vehicle No: SHD7161G

With reference to your application for the accident report, we have attached the following accident reports as requested:

Table with 5 columns: DOCUMENTS, ACCIDENT LOCATION, PER DOC (S\$), QTY, AMOUNT (S\$). Rows include SHD7161G, GST Amount, and Total Amount Due (GST Inclusive).

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Payment Method:
[X] GIRO [ ] Cash [ ] Cheque

## 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 willful 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	30/04/2018 16:49
Date Of Accident	30/04/2018 12:40
Exact Location Of Accident	BIDEFORD ROAD TWDS PARAGON TAXI STAND
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7161G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
<b>Vehicle Particulars</b>	
Manufacturer	HYUNDAI
Model	I40
Vehicle Category	TAXI
<b>Insurance Company</b>	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
<b>Driver</b>	
Name of Driver	LAI LEOK SHEN
NRIC No	S1434158G
Address	200 08-1217 TOA PAYOH NORTH

### General information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR

### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	4

### Circumstances of Accident

SEE ATTACH.

### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKZ3361X

Vehicle Make/Model/Colour

/

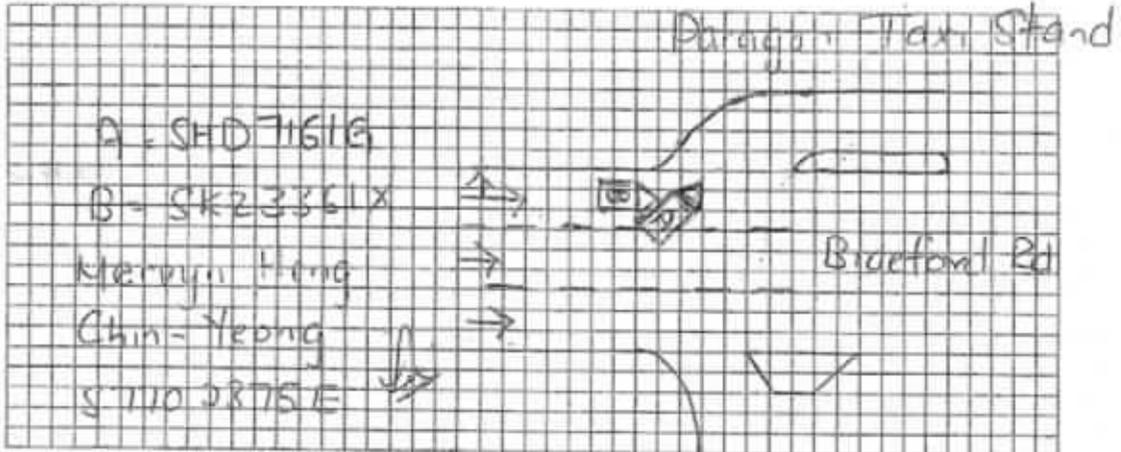
Name of Driver

MERVYN HENG CHIN YEONG

Insurance Company Name

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/4/18 @ abt 1240hrs, I was driving along Bradford Rd towards Paragon taxi stand on the second lane from the left. I slowly filter to my left suddenly a car SK23361X coming from behind hit & grazed against the left centre of my taxi. 3 female passengers (2 children + 1 adult) on board my taxi. No injury reported at the point of accident.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303831R

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
Date & Time:

Teo Yen Yee

**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.

COMFORT TRANSPORTATION PTE LTD. 

CC RES NO-199303821R

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(if driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:

 **Joe Yen Yee**

## Enquire Vehicle & Owner Information ( Vehicle No. SHD7161G As At 30 Apr 2018 / 12:55:00 )

### Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: MN.IG.B1.1812388

### Current Owner Details

Owner ID Type: Company

Owner ID: 199303821R

Owner Name: COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name: SIN MING DRIVE

Registered Unit No.: -

Registered Building Name: GAS BUILDING

Registered Postal Code: 575717

### Current Vehicle Details

Vehicle No.: SHD7161G

Make Description/Model: HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT'L INS PTE LTD

# Thank you



Lim Hwee Peng has successfully logged out.

Your last login date and time was 03 May 2018, 10:06:11.

To return to ONE.MOTORING, please [click here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

## Session Transaction History

S/No. <sup>1</sup>	Asset Type <sup>2</sup>	Asset ID <sup>3</sup>	Asset Owner ID <sup>4</sup>	Transaction Type <sup>5</sup>	Transaction Amount (S\$) <sup>6</sup>	Log Date/Time <sup>7</sup>
1	Vehicle	SHD7161G	-	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	03 May 2018 / 10:06:45

## Enquire Transfer Fee

### Vehicle Details

Vehicle No.: SKZ3361X  
Vehicle Type: P11 - Passenger Station Wagon/Jeep/Land Rover  
Vehicle Attachment 1: With Sun Roof  
Vehicle Scheme: Normal  
Vehicle Make: MAZDA  
Vehicle Model: MAZDA5 5-DOOR WAGON 2.0L SP.6EAT SUNROOF  
Chassis No.: JM6CW1071G0123137  
Propellant: Petrol  
Engine No.: PE10294819  
Engine Capacity: 1998 cc  
Maximum Power Output: 111.0 kW (148 bhp)  
Maximum Laden Weight: 2130 kg  
Unladen Weight: 1535 kg  
Year Of Manufacture: 2015  
Original Registration Date: 19 Jan 2016  
Lifespan Expiry Date: -  
COE Category: E - Open Category  
Quota Premium: \$57,501.00  
COE Expiry Date: 18 Jan 2026  
Road Tax Expiry Date: 18 Jul 2018  
PARF Eligibility Expiry Date: 18 Jan 2026  
Inspection Due Date: 18 Jan 2019  
Intended Transfer Date: 02 May 2018  
CO2 Emission: 158.00 (g/km)  
CEV/VES Rebate Utilised Amount: -  
CO Emission: -  
HC Emission: -  
NOx Emission: -  
PM Emission: -

The current road tax expiry is 18 Jul 2018. You may renew the road tax from 19 Apr 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 18 Jul 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 19 Jul 2018 to 18 Jan 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
<b>Sub Total:</b>			<b>25.00</b>
Nett Road Tax Amount (After Offsetting Over Payment):	605.00	-	605.00
<b>Total Amount Payable:</b>			<b>630.00</b>

### Amount Payable (From 19 Jul 2018 to 18 Jul 2019)

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
<b>Sub Total:</b>			<b>25.00</b>
Nett Road Tax Amount (After Offsetting Over Payment):	1,210.00	-	1,210.00
<b>Total Amount Payable:</b>			<b>1,235.00</b>

You may print this page for reference.

OK

Print



# MC-COY

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883  
 Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

Invoice No 18010-05/AY

Billing Name & Address

Date 1 Jun 2018

Lee Yuet Li  
 c/o No.1 Kaki Bukit Ave 6  
 #01-53/55 AutoBay@ Kaki Bukit  
 Singapore 417883

Vehicle No : SKZ 3361 X

Model : Mazda 5

Item	Descriptions	Amount S\$
1	Date of inspection : <u>10 May 2018</u> A copy of the inspection / survey report Correspondence, postages and etc.	
2	Photography Services - Develop photographs - Storage of digital photographs - Submission of photographs <u>84</u> copies	
3	Transportation Charges	
4	2nd Inspection & Final Inspection	
	Total	<u>\$ 644.00</u>
	SDLS : SIX HUNDRED AND FORTY-FOUR ONLY	

Notes :

1. All cheque payment should be "Crossed" and made payable to "Mc-Coy Appraiser Pte. Ltd."
2. All cheque should have our "Invoice No." written on the reverse side of the cheque
3. For further enquiries on this invoice, please feel free to contact us



Official Stamp

E & O. E

# MC-COY

APPRAISER PTE LTD

No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883  
Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

Report Reference : TP / 18010-05/AY / 2018  
Date of Report : 1 Jun 2018

Lee Yuet Li  
c/o No.1 Kaki Bukit Ave 6  
#01-53/55 AutoBay@ Kaki Bukit  
Singapore 417883

## THIRD PARTY SURVEY ACCIDENT HAPPENED ON 30 Apr 2018

Workshop Address : Bluwel Automotive Service Pte Ltd  
No.1 Kaki Bukit Ave 6  
#01-53/55 AutoBay@ Kaki Bukit  
Singapore 417883

As per your instruction dated **10 May 2018** with regard to the above matter. We have carried out a physical inspection on the said vehicle **SKZ 3361 X**. We enclosed herewith our report and findings as follows:

### 1. VEHICLE PARTICULARS

Registration No	: SKZ 3361 X	Engine No	: PE10294819
Model	: Mazda 5	Mileage	: 34411
Year / Capacity	: 2016/1998	Colour	: Blue
Chassis No	: JM6CW1071G0123137		

### 2. TYRES CONDITION

	<u>Size</u>	<u>Made</u>	<u>Balance</u>		<u>Rim</u>
FRONT O/S	: 205/55 R16	Toyo	6.00	mm	Sport
REAR O/S	: 205/55 R16	Toyo	6.00	mm	Sport
FRONT N/S	: 205/55 R16	Toyo	6.00	mm	Sport
REAR N/S	: 205/55 R16	Toyo	6.00	mm	Sport



No. 1 Kaki Bukit Ave 6 #01-28 AutoBay @ Kaki Bukit Singapore 417883  
Tel: 6748 6653 Fax: 67471017 Registration No: 200723252D

### 3. DESCRIPTION OF DAMAGES

At the time of inspection, we noted that the vehicle has sustained an impact damages on the front o/s portion(s). For more detail of the damages, please see photograph attached.

4. Estimated normal period of repair : **4** working days to complete.
5. Enclosed number of photograph : **84** copies.
6. In accordance to your instruction, we have **Not Authorised** repair to the vehicle and the survey was done on a **"Without Prejudice"** basis. We hope that this report will be of assistance to you in dealing with the matter.
7. Should you discover any discrepancy in the report, please kindly notify us **within 2 weeks**, or the report will be treated as correct.

#### Disclaimer

The rates and assessment of damages as stated in this report is to be used solely for legal proceedings in relation to the surveyed vehicle and the accident in which the surveyed vehicle was involved in. The rates and assessment of damages must not be used in any circumstances for comparison with other vehicles and/or other accidents in other legal proceedings.

Vehicle No: **SKZ 3361 X**  
 Report No: **TP/ 18010-05/AY / 2018**

**SPARE PARTS**

Qty	Parts Description	Condition	Workshop's Estimation	Our Revised Estimation
<u>List Items</u>				
1	Front o/s headlamp	Damage	\$ 1411.40	\$ 1411.40 ✓
1	Front bumper	Damage	\$ 1055.40	\$ 1055.40 ✓
1	Front bumper logo	Necessary	\$ 43.40	\$ 43.40 ✓
1	Front bumper fog lamp cover	Damage	\$ 24.40	\$ 24.40 ✓
1	Front bumper inner sponge	Intact	\$ 75.40	\$ 11 ✓
1	Front bumper reinforcement	Repair	\$ 506.20	\$ 11 ✓
1	Front bumper side o/s retainer	Necessary	\$ 20.50	\$ 20.50 ✓
1	Front o/s fender	Damage	\$ 307.00	\$ 307.00 ✓
1	Front o/s fender inner shield	Damage	\$ 200.00	\$ 200.00 ✓
1	Front o/s fender inner shield clip (1 set)	Necessary	\$ 28.00	\$ 28.00 ✓
1	Front o/s wheel hub c/w bearing	Necessary	\$ 306.30	\$ 306.30 ✓
1	Front o/s shock absorber	Damage	\$ 253.10	\$ 253.10 ✓
1	Front o/s knuckle arm	Damage	\$ 368.40	\$ 368.40 ✓
1	Front o/s lower arm	Damage	\$ 391.30	\$ 391.30 ✓
1	Front sport rim	Damage	\$ 1100.90	\$ 1100.90 ✓
			<u>\$ 6091.70</u>	<u>\$ 5510.10</u>
	Discount	20.0%	\$ 1218.34	\$ 1102.02
			<u>\$ 4873.36</u>	<u>\$ 4408.08</u>
<u>Special Nett Items</u>				
1	Front tyre (Depreciation)	Damage	\$ 400.00	\$ 11 240.00 ✓
			<u>\$ 400.00</u>	<u>\$ 240.00</u>

4865.7

**Spare Parts Total**      \$ 5273.36      \$ 4648.08

Vehicle No: **SKZ 3361 X**  
 Report No: **TP/ 18010-05/AY / 2018**

**LABOUR COST**

S/No	Job Descriptions	Workshop's Estimation	Our Revised Estimation
	Spare Parts Total c/f	\$ 5273.36	\$ 4648.08
1	To remove and refit damage parts, test for proper functioning and focus of headlamps.	\$ 50.00	\$ 40.00 <i>20</i>
2	To remove and refit front undercarriage.	\$ 300.00	\$ 20.00 ✓
3	To check and re-adjust (Computerized) all wheel alignment.	\$ 200.00	\$ 120.00 ✓
4	To remove and replace the above damaged parts, straighten, knock out, realign and repair including cut and weld body panels. To re-adjust to the original position using power tools.	\$ 800.00	\$ 500.00 <i>300</i>
5	To spray paint on the replaced and repaired parts, prepare spray such as masking tape the unaffected areas with paper, cleaning and sanding of surfaces, final polishing and waxing are also available.	\$ 800.00	\$ 500.00 <i>400</i>
6	To apply undercoating on the repaired and replaced panels for rust protection.	\$ 100.00	\$ 30.00 ✓
<b>Total</b>		<u>\$ 7523.36</u>	<u>\$ 5858.08</u>
		<i>890</i>	<i>1</i>
The repairer has agreed to undertake the repair under a Lump Sum Basis. We have further adjusted the amount to a Lump Sum Repair Contract of:		\$ 4700.00	

SDLS: FOUR THOUSAND SEVEN HUNDRED ONLY

  
 \_\_\_\_\_  
 Qualified Appraiser

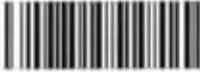


## LKK Auto Consultants Pte Ltd

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			
INDIA INTERNATIONAL INSURANCE PL		Ref : CS3/III18008583/Utbe2-1	
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711		Date : 25-07-2018	
		Code : III2	
1. Policy Particulars :- THIRD PARTY CLAIM (RESURVEY INSPECTION)			
Insured Veh.	SHD 7161G	Veh. Inspected	SKZ 3361X
Policy No.		Coverage (\$)	0.00
Claim No.	MCT18040843	Excess (\$)	0.00
Assign From	DANIEL POOI	Assign Date	04/07/2018
2. Vehicle Particulars & Condition			
Make & Model	MAZDA 5 (A)	c.c	1998
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	JM6CW1071G0123137	Colour	BLUE
Odometer	35665	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	205/55 R16	TOYO	5 mm
L/H Front Tyre	205/55 R16	TOYO	5 mm
R/H Rear Tyre	205/55 R16	TOYO	5 mm
L/H Rear Tyre	205/55 R16	TOYO	5 mm
4. Description of Damages			
THE VEHICLE HAD COMPLETED ITS REPAIR WORKS. REPAIR CONDITION SEE DETAILS.			
5. General Information			
Accident Date	30/04/2018	Inspection Date	09/07/2018
Survey held at	BLUWEL AUTOMOTIVE SERVICE PTE LTD BLK 1 KAKI BUKIT AVE 6 #01-28/51/53/55(MAIN OFFICE) SINGAPORE 417883		
5a. Remarks			
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair			
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>4 Working Days</b>	



## 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: 199607196R GST Reg. No. 19-9607196-R

Page No.:1 of 2

### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKZ 3361X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	FRONT O/S HEADLAMP	REPLACED	1,411.40	1,411.40
1	FRONT BUMPER	REPLACED	1,055.40	1,055.40
1	FRONT BUMPER LOGO	REPLACED	43.40	43.40
1	FRONT BUMPER FOG LAMP COVER	REPLACED	24.40	24.40
1	FRONT BUMPER INNER SPONGE	NOT NECESSARY	75.40	-
1	FRONT BUMPER REINFORCEMENT	NOT NECESSARY	506.20	-
1	FRONT BUMPER SIDE O/S RETAINER	REPLACED	20.50	20.50
1	FRONT O/S FENDER	REPLACED	307.00	307.00
1	FRONT O/S FENDER INNER SHIELD	REPLACED	200.00	200.00
1	SET FRONT O/S FENDER INNER SHIELD CLIP	REPLACED	28.00	28.00
1	FRONT O/S WHEEL HUB C/W BEARING	REPLACED	306.30	306.30
1	FRONT O/S SHOCK ABSORBER	REPAIRED SEE LABOUR	253.10	-
1	FRONT O/S KNUCKLE ARM	REPLACED	368.40	368.40
1	FRONT O/S LOWER ARM	REPAIRED SEE LABOUR	391.30	-
1	FRONT SPORT RIM	REPLACED	1,100.90	1,100.90
	LESS 20% DISCOUNT		-1,218.34	-973.14
			4,873.36	3,892.56
<b><u>SPECIAL NETT ITEMS</u></b>				
1	FRONT TYRE (SN)	NOT NECESSARY	400.00	-
			400.00	-
<b><u>LABOUR</u></b>				
	TO REMOVE AND REFIT DAMAGE PARTS, TEST FOR PROPER FUNCTIONING AND FOCUS OF HEADLAMPS.		50.00	20.00
	TO REMOVE AND REFIT FRONT UNDERCARRIAGE.		300.00	20.00
	TO CHECK AND RE-ADJUST (COMPUTERIZED) ALL WHEEL ALIGNMENT.		200.00	120.00



## LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND REPLACE THE ABOVE DAMAGED PARTS, STRAIGHTEN, KNOCK OUT, REALIGN AND REPAIR INCLUDING CUT AND WELD BODY PANELS. TO RE-ADJUST TO THE ORIGINAL POSITION USING POWER TOOLS. INCLUSIVE OF THE REPAIR OF FRONT O/S SHOCK ABSORBER AND FRONT O/S LOWER ARM		800.00	300.00
	TO SPRAY PAINT ON THE REPLACED AND REPAIRED PARTS, PREPARE SPRAY SUCH AS MASKING TAPE THE UNAFFECTED AREAS WITH PAPER, CLEANING AND SANDING OF SURFACES, FINAL POLISHING AND WAXING ARE ALSO AVAILABLE.		800.00	400.00
	TO APPLY UNDERCOATING ON THE REPAIRED AND REPLACED PANELS FOR RUST PROTECTION.		100.00	30.00
			2,250.00	890.00
<b>GRAND TOTAL</b>			<b>7,523.36</b>	<b>4,782.56</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>3,800.00</b>

Report Ref No. CS3/III18008583/Utbe2-1

CHUA KANG SENG

Licensed Appraiser

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

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