

199200

INSR CASE OWNER

CC 4/ICS1801 7h74, N elob3

LKK
IDAC

Surveyor:

NAZ

DOI:

ASSIGNMENT
6/8/18

Date / Time:

6/8/18

Registered in Meriton:

6/8/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SKV 2617L

Claim No.:

DMP1251077PH

Name of Insured:

KWAN WIM WENG ABEU

Policy No.:

MPC12A2042501

Insured Tel No.:

HP: 98261421

Make / Model:

TOYOTA

Excess Sec II :SS

D.O.A: 4/8/18

Place of Accident:

ENST LINT RD

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L) (YES / NO)

OI GIA REPORT (YES / NO)

TP GIA REPORT (YES / NO)

Insured Liability:

Final? Yes / No

SHD 4879P



INSRS:
WSP:
Tel:
Liability:
RMKS:

WBE W



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

| Date / Time | STAGE | DATE / PIC |
|------------------|--|------------|
| 19/8/18 Waker | Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI: | 12/9/18 |
| 29.8.18 2.30 | Documentation Check List: Handler Typist | |
| 19.9.18 | Notification ltr (if non-pickup): After call ltr to OI: Authorisation To Act: Release Voucher: Final Repair Bill: Car Rental Invoice: Towing Invoice: LTA / GIA: Medical Bill: PIR: Mandate/Reject Instruction: LOD: Payment Breakdown Form: | |
| 5/10/18 | Spoken to Bernadette (ECLIS). This is a PRS case, pls submit survey report. He will offer to tp. | |

RECEIVED 14 SEP 2018

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: 11.7.18 Confirm with: Confirm by: MMA

Repair Cost: 45 SS 1,100 (3 days) Reduction: 53 % Email Call

FINAL SETTLEMENT Date/Time: Confirm with: Email Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 15

Repair Cost: 46/651 SS 1,111.00 On CHANGED LIME TIT TP.

Loss of Rental (LOR): SS 521.16 (4.5 days) x 117.20

Loss of Use (LOU): SS - (5 x days)

Loss of Income (LOI): SS 225.00 (550 x 4.5 days)

LOR only LOU only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search: SS 1.49

Medical: SS -

Disbursement: SS - (e.g. Tow/Independent)

Legal Cost: SS -

Total: SS 1,437.55 **Global Sum SS:**

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1: SS Name 1:

Payee 2: (Strike if N.A.) SS Name 2:

Payee 3: (Strike if N.A.) SS Name 3:

6/10/18

NA2

BC103

ASSIGNMENT

SMD 4879P

From: _____ Date: _____

Visit No: ~~114~~ ~~477~~ ~~478~~ Page: 12 MAR 2014

Estimated Cost: _____

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

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

Truck / Trailer or

To inspect Vehicle No: _____

Make: HYUNDAI 140 2016

at Workshop No: _____

Colour: BLUE 3 Insured / Std / Nil / NA

of _____

Sp. Reading: 706359 7 Insured / Std / Nil / NA

Insured: _____

Eng. No: _____

Policy No: _____

C. No: KMHLEB4104ME41048689

Claims No: _____

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured: _____ Excess: _____

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh: _____

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

(Policy Condition)

Tyre Size: F: 215/60 R16

R: 11

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

| | |
|-----|-----|
| X | |
| N/S | O/S |
| | |

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

TOYO / YOKO or WESTLAKE

Sal. or Market Value: _____

Front 6 mm Rear 6 mm

IDAC Accident Report: _____ Consistent? : Yes or No

R/Bal. 6 mm L/Bal. 6 mm

GA / FR Seen: _____ Consistent? : Yes or No

D.O.A. 9/7/18 D.O.I. 6/7/18

Est. Repairs: 3 days Res.: Yes or No

Survey held at CDK E LAYANG

Lum Sum: 20 % 3 Val.: Yes or No

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

CA / REV / REP. / 24 HRS

N/S FRONT

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

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

Date / Time Action / Instruction

11/7/18 FINALIZED Lump sum REPAIR \$1100 / 3 DAYS

(880 -> 1,225.28 50%)

BC103 L/S

One Time File Pass to: Prel. Report Final Report

Days Of Repair: 3
Resurvey No. of Trip: _____

| | |
|--------------------|--|
| Survey Fee | |
| Transport | |
| _____ \$ - 00 - 00 | |
| _____ \$ - 00 - 00 | |
| _____ \$ - 00 - 00 | |
| _____ \$ - 00 - 00 | |

Add Fee: Site Insp \$ Inter. \$ Tech. \$ Rep. \$

Report Format: _____
Lump Sum (I.B.I.): _____



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

ECICS LTD

Ref : CC4/ICS18012334/Neb3

7 TEMASEK BOULEVARD
#10-01 SUNTEC TOWER ONE
SINGAPORE 038987

Date : 06-07-2018



Code : ICS

1. Policy Particulars :- THIRD PARTY CLAIM

| | | | |
|--------------|-----------|----------------|------------|
| Insured Veh. | SKV 2817L | Veh. Inspected | SHD 4879P |
| Policy No. | | Coverage (\$) | 0.00 |
| Claim No. | | Excess (\$) | 0.00 |
| Assign From | | Assign Date | 06/07/2018 |

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 | 04/07/2018 | Inspection Date | 06/07/2018 |
| Survey held at | COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969 | | |

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

member of COMFORTDELGRO

Date/Time: 05.07.2018 15:29 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO: 305184101

| | | |
|--|---|---|
| TOWER AS COMFORT TRANSPORTATION PTE LTD TOWER NO. 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P) | REGN NO. SHD4879P MAKE: HYUNDAI MODEL I-40 YR OF MANU 12.03.2014 CHASSIS CODE RMHLB41UMEU048689 | MILEAGE FUEL E. 1/2 F DATE/TIME IN 05.07.2018 11:40 TARGET DATE COMPLETION DATE/TIME: |
|--|---|---|

ECICS

QUANTITY CARD NO.

JOB DESCRIPTION

Accident Date: 04.07.2018
 NATURE: 3P 04.07.2018

| S/NO | LABOR CODE | DESCRIPTION |
|------|------------|-------------|
|------|------------|-------------|

CHECKED & PASSED OUT BY: _____

| | | | |
|---|--|-------------------------|------|
| SERVICE ADVISOR | | CUSTOMER'S SIGNATURE | |
| Wedgement Slip No. SHD4879P LKE | Exit Pass Vehicle No.: SHD4879P | Name of Service Advisor | Date |
| Signature/Date returned to Service Reception upon collection | Signature/Date To be kept by Security Guard | | |

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 4879P

DATE 5/7/2018 12:45

L/Sum

MAKE :

L/S

Like

ECICS

MODEL : HYUNDAI i40

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|-----|-------------------------------------|------|------------|--------------------|
| | Front Bumper Cover | | | \$ 562.30 |
| | Front Bumper Bracket (LH) | | | \$ 24.60 |
| | Front Bumper Retainer Mounting | | | \$ 9.20 |
| | Front Fender (LH) | | | \$ 619.00 |
| | Front Fender Shield (LH) | | | \$ 169.80 |
| | Front Fender Retainer | | | \$ 9.20 |
| | SUB TOTAL | | | \$ 1,394.10 |
| | LESS 20% | | | \$ 278.82 |
| | DISCOUNTED TOTAL | | | \$ 1,115.28 |
| | | | | |
| | Frnt Fender Advertisement Logo (LH) | | | \$ 100.00 |
| | | | | \$ 100.00 |
| | Labour Charge | | | |
| | Panel Beating | | | \$ 560.00 |
| | Spray Painting Charge | | | \$ 500.00 |
| | Tuff Kote | | | \$ 50.00 |
| | TOTAL LABOUR | | | \$ 1,110.00 |
| | ESTIMATE TOTAL | | | \$ 2,325.28 |

*XR
?
?
/DT
?
?*

Nett / net

*400
400
77*

*NAZ LKE
L/S
6/7/18 16:00
3 days
After repair photo*

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

WILFORD DELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHD 4879P

DATE 5/7/2018 12:45

L/Sum

MAKE :

L/S

Like

ECICS

MODEL : HYUNDAI i40

| Qty | Parts Description/ Labour | Type | Unit Price | Amount |
|-----|-------------------------------------|------|------------|-------------|
| | Front Bumper Cover | | | \$ 562.30 |
| | Front Bumper Bracket (LH) | | | \$ 24.60 |
| | Front Bumper Retainer Mounting | | | \$ 9.20 |
| | Front Fender (LH) | | | \$ 619.00 |
| | Front Fender Shield (LH) | | | \$ 169.80 |
| | Front Fender Retainer | | | \$ 9.20 |
| | | | 619 | |
| | | | -20% | |
| | SUB TOTAL | | | \$ 1,394.10 |
| | LESS 20% | | | \$ 278.82 |
| | DISCOUNTED TOTAL | | 495.20 | \$ 1,115.28 |
| | Frnt Fender Advertisement Logo (LH) | | 100 | \$ 100.00 |
| | | | | \$ 100.00 |
| | Labour Charge | | | |
| | Panel Beating | | | \$ 560.00 |
| | Spray Painting Charge | | | \$ 500.00 |
| | Tuff Kote | | | \$ 50.00 |
| | | | 800 | |
| | TOTAL LABOUR | | 1,395.20 | \$ 1,110.00 |
| | | | -20% | |
| | ESTIMATE TOTAL | | 1,116.16 | \$ 2,325.28 |

XR
XSVL
XSVL
/DT
XSVL
XSVL

Nett / net

400
400
111

NAZ LK
L/S \$1,100
6/7/18 1600
3 days
After repair photo

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508989
Fax: 6546 8156

Our Job Ref No : 305184101

Date : 09/07/18

FINALIZATION FORM

To : LKK

Fax :

Attn : Mr NAZ

Vehicle Reg No. SHD4879P CTPL

04.07.18

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: ECICS --- SKV2617L
2. The finalized amount shall be:
 - (a) Spare Parts after List discount _____
 - (b) Labour Charges _____
 - Total for Part-By-Part Repair Cost** _____
 - (c) Lumpsum Repair (if applicable) _____
 - Total for Lumpsum repair cost after Less: 20% \$1,100.00
 - Final Lumpsum Repair cost** \$1,100.00

3. Estimated normal period for repairs: 3 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Signature : 

Name : LIM KWOK ENG

Name : NAZ

Tel : 62148316

Date : 11/7/18

Fax : 65468156

For Official Use Only

| Item | Amount | Document Attached Yes or No | Confirm By (Signature) | Remarks |
|--|--------|-----------------------------|------------------------|---------|
| 1. Rental Rate P/Day | | YES | | |
| 2. Loss of Income Paid | | NO | | |
| 3. Survey Fees | | | | |
| 4. LTA Search Fee | \$7.49 | | | |
| 5. Medical Fees (on behalf of driver, if applicable) | | | | |
| 6. Overrun | | | | |

Remarks:

Asher Sng (LKKAuto)

From: Asher Sng (LKKAuto)
Sent: Wednesday, 12 September 2018 3:04 PM
To: 'AVRILKWAN@GMAIL.COM'
Subject: ACCIDENT INVOLVING SKV 2617L & SHD 4879P AT / ALONG EAST COAST ROAD ON 04/07/2018.

HI KWAN WAI LENG AVRIL,

[Without Prejudice]

By Email Only

ACCIDENT INVOLVING SKV 2617L & SHD 4879P AT / ALONG EAST COAST ROAD ON 04/07/2018.

We refer to the above accident matter.

As spoken, we are the loss adjusters acting on behalf of M/s ECICS Limited, the Motor Insurer of SKV 2617L on the reported accident on 04/07/2018.

Our Principal has received a Third Party property damage claim from the owner of SHD 4879P with regards to the above accident.

We will try our best to negotiate for an amicable settlement on best possible terms with Third Party under the terms and conditions of your motor policy. In this respect, the vehicle's premium/NCD may be affected as a result of the above claim.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

In the event that you receive any letters/ court documents regards to the above accident matter, please do not reply or respond, you may forward to us directly for further handling and we will reply on your behalf.

Thank you.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants

phone: 6841-6051 | email: ashersng@lkkauto.com | fax: 6741-4108

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

Our Ref : T 0718/ SHD4879P /JW(st)
 Your Ref : _____
 Date : 17-Jul-18

ECICS LIMITED
 #10-03
 7 Temasek Boulevard
 Singapore 038987

CDGE Taxi Claims Dept
 59 Loyang Drive 4th Flr
 Singapore 508969

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

Mobile: +65 6385 6280
 Facsimile: +65 6280 8755

www.cdge.com.sg

Company Registration No: 198000000

Workshops

Braddell
 205 Braddell Road
 Singapore 579701

Loyang
 59 Loyang Drive
 Singapore 508969

Sin Ming
 383 Sin Ming Drive
 Singapore 575717

Pandan
 45 Pandan Road
 Singapore 609206

Ubi
 320 Ubi Road 3
 Singapore 408649

Senako
 24 Senako Loop
 Singapore 758156

Sungei Kadut
 7 Sungei Kadut Way
 Singapore 728791

Yishun
 501 Yishun Industrial Park A
 Singapore 768732

Attn : Motor Claims Department **WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SHD4879P AND YOUR INSURED
SKV2617L OTHER _____ ON 04.07.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SHD4879P** which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving : **SKV2617L** we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

| | | | |
|--------------------|---|----|--------------------|
| 1 | Cost of Repair | \$ | 1,177.00 |
| 2 | <u>5</u> days Loss of Rental @ \$ <u>117.28</u> per day | \$ | 586.40 |
| 3 | Survey Report Fees (Surveyed by M/s LKK) | \$ | - |
| 4 | GIA / LTA Search Fees | \$ | 7.49 |
| 5 | GIA / Police Report Fees | \$ | - |
| 6 | Towing / Medical / Transportation Fees | \$ | - |
| Sub Total : | | | \$ 1,770.89 |

HIRER'S CLAIM

| | | | |
|-----------------------|--|----|--------------------|
| 7 | <u>5</u> days Loss of Income @ \$ <u>80.00</u> per day | \$ | 400.00 |
| Total Claims : | | | \$ 2,170.89 |

We enclosed herewith the following documents to support the claims: -

- a) Original repair bill and photocopied photographs : 6 pcs
- b) LTA search slip/s of : SKV2617L
- c) GIA / Police report/s of : SHD4879P
- d) Letter of authority from owner / hirer / operator
 - () Witness statement/s () Certificate of Insurance (X) Rental Rate letter
 - (X) Photograph/s of Accident Scene

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully
Jim Wong
 Deputy Manager
 CDGE Claims Department
 Tel : 6214 8374 Fax : 6214 1843 Email : jimwong@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO



LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING i 40 SHD4879P , SKV2617L ON 04-Jul-18 15:40
ALONG EAST COAST RD TWDS STILL RD BEFORE TEMELING RD

I / We **TEO SENG HIN** (Hirer) NRIC No.: **S1117324A**

and/or (Relief) NRIC No.:

Taxi Number **SHD4879P**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "**ComfortDelGro Engineering Pte Ltd**".

Date **05-Jul-2018**

Name of Hirer **TEO SENG HIN**
Hirer NRIC **S1117324A**

Signature :



Address **204 MARSILING DRIVE #05-212**
730204

Contact No. **98313802**

TAX INVOICE

9010381
 ECICS LIMITED
 10-03 7 Tampak Boulevard
 SINGAPORE 036987
 CONTACT NO: 63374779

VEHICLE NO
 SHD4879P
 MAKE
 HYUNDAI
 MODEL
 I-40
 DATE OF REG
 12.03.2014
 CHASSIS CODE
 KMHLE41UMEU048689

INV. NO/DATE
 91383649 12.07.2018
 JOB NO.
 305184101
 ODOMETER READING

 JOB TYPE

Description : 3P 04.07.2018

Invoice for Lump Sum Repair

| | | |
|-----------------------------|--|-----------------|
| Total Lump Sum Repair Amt | | 1,100.00 |
| Add GST @ 7.000 % | | 77.00 |
| Total Invoice amount | | 1,177.00 |

Issued by : CHEWSELENG 12.07.2018 15:37:16
 Repair Type : CLSO/57/57
 Payment Type/Term : /Credit 30 days

- WHILE USING ALL INFORMATION REGARDING THE TRAFFIC ACCIDENTS DAMAGE THE COMPANY ACCEPTS AN IRRESPONSIBILITY FOR LOSS OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS RISK
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY ADVISE IN WRITING TO THE COMPANY OF ANY COMPLAINTS OTHERWISE, THE VEHICLE WILL BE DEEMED TO HAVE BEEN PAID FOR IN GOOD ORDER
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAILY TO DRY BASIS ON PERFECT OR NOT APPROVED CASE AND APPLIES TO THE COMPANY BY THE CUSTOMER AND NOT TAKEN ON THE DATE OF PAYMENT I.E. AFTER 30 DAYS FROM THE DATES FOR THE PERIOD OF DEFAULT
- PLEASE EXCHANGE YOUR INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 15 DAYS OF RECEIPT IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING

ComfortDelGro Engineering Pte Ltd
 A member of COMFORTDELGRO

Head Office:
 205 Braddell Road
 Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

| ACCOUNT No. | INVOICE No. | AMOUNT | BANK/CHO No. |
|-------------|-------------|--------|--------------|
| | | | |
| | | | |
| | | | |

Our Ref: CT18070122

Date: 12 July 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 04/07/2018 @ 15:40 hrs
ALONG EAST COAST RD TWDS STILL RD BEFORE TEMELING
 RD
INVOLVING SKV2617L

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHD4879P** (the "Taxi"). The Taxi was hired to **TEO SENG HIN IC NO S1117324A** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$117.28** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

Enquire Vehicle Insurer

| Vehicle No. | Incident Date/Time | Search Status | Insurance Company Code | Insurance Company Name |
|-------------|------------------------|---------------|------------------------|------------------------|
| SKV2617L | 04 Jul 2018 / 15:40:00 | Successful | E06 | ECICS LIMITED |

[Previous](#)[OK](#)

540 4879 P

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

| CLAIM SUBFOLDER TRACKING | | | | | | | |
|--------------------------|--|---------------|--|--|--|-------------|---|
| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'ed | Status |
| Main | 05 Oct 2018 12:46 Edit Reg | | 06 Jul 2018 00:00 Edit Adj Rpt | S\$1,100.00 Edit Estimates | S\$1,100.00 View Rpt | | Pending for Survey Report Cancel Case |

| Main | Reference | Claim Details | Documents | Show All | | | | | |
|---|--|------------------------|--|--------------------------|----------------|--------------------|---------------------|-------------------|--------------|
| CLAIM SUBFOLDER DETAILS [Created by adjuster] | | | | | | | | | |
| Insured: | KWAN WAI LENG AVRIL , ID: -, Email: www.abcd@com.sg | | | | | | | | |
| Main Claimant: | COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R | | | | | | | | |
| Vehicle Reg. No.: | SHD4879P | Date of Loss: | 04/07/2018 15:00 - :59 [51 Months and 22 Days From LTA Reg Date (Man Yr)] | | | | | | |
| Claim Type: | TP / DMPC1800274H | Policy/Cover Note No.: | | | | | | | |
| Vehicle Reg. No. (Insured): | SKV2617L | Policy No. (Claimant): | D-18088936MFSH | | | | | | |
| | | Excess: | | | | | | | |
| Repairer: | ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300 | | | | | | | | |
| Handling Insurer: | ECICS Limited (HQ) - Tel: 63374779 /6303 0178 ... [Handled by Desmond Lee - 6303 0167] | | | | | | | | |
| Claimant's Insurer: | MS First Capital Insurance Ltd (HQ) - Tel: 62222311 | | | | | | | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Muhammad Nazril Bin Abdullah] ... [Final Rpt due 17/07/2018] | | | | | | | | |
| ASSOCIATED MAIL RECEIVED View All Compose Case Mail | | | | | | | | | |
| There are no mail for this case. | | | | | | | | | |
| ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete | | | | | | | | | |
| Due Date | Priority | Type | Task Group | Subject | Handler | Assigned By | Completed On | Created On | Done? |
| No results. | | | | | | | | | |

Claim Documents

*SHD4879P (DMPC1800274H)
[SKV2617L]
TP
COMFORT TRANSPORTATION PTE LTD
Jul 4 2018 3:00PM
[KWAN WAI LENG AVRIL]
ComfortDelGro Engineering Pte Ltd

| Upload Documents | | Upload Photos | | Compose New Letter | | View View in Browser | | |
|---------------------------|-----------------|-----------------------------------|--|--------------------|--|--|------------|-------------------------------------|
| Assessment Reports | | | | | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | LKK Auto Consultants Pte Ltd (HQ) | | | | Thumbnail | Print | |
| 1 | 09/07/18 14:34 | Adjuster Immediate Advice | | | | | Load HTM | <input type="checkbox"/> |
| Photos/Images | | | | | | | 3 per page | <input checked="" type="checkbox"/> |
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | | | | Thumbnail | Print | |
| 1 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 7 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 8 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 9 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 10 | 11/07/18 11:53 | General View | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 11 | 11/07/18 12:41 | Reinspection Photo | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 12 | 11/07/18 12:41 | Reinspection Photo | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 13 | 11/07/18 12:41 | Reinspection Photo | | | | | Load JPG | <input checked="" type="checkbox"/> |
| 14 | 11/07/18 12:41 | Reinspection Photo | | | | | Load JPG | <input checked="" type="checkbox"/> |
| Documentation | | | | | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | | | | Thumbnail | Print | |
| 1 | 06/07/18 15:06 | EMAIL FROM ICS DD 06072018 | | | | | Load PDF | <input type="checkbox"/> |
| 2 | 06/07/18 15:06 | TP EST & GIA REPORT | | | | | Load PDF | <input type="checkbox"/> |
| 3 | 09/07/18 17:41 | TP ESTIMATE- MARKED | | | | | Load PDF | <input type="checkbox"/> |
| 4 | 19/07/18 09:58 | OI GIA REPORT | | | | | Load PDF | <input type="checkbox"/> |
| 5 | 05/10/18 12:52 | WORKSHOP INVOICE | | | | | Load PDF | <input type="checkbox"/> |
| 6 | 05/10/18 12:52 | RENTAL RECEIPT | | | | | Load PDF | <input type="checkbox"/> |
| 7 | 05/10/18 12:52 | LOD | | | | | Load PDF | <input type="checkbox"/> |

Documents Checklist

| | | | | |
|---|--|-------|------|-------|
| DOCUMENTS CHECKLIST | | Reset | Save | Print |
| There are no document checklists configured. | | | | |
| Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) | | | | |
| <div style="border: 1px solid black; width: 100%; height: 100%;"></div> | | | | |

Show Remarks To: Handling Insurer

Note: Remarks are private unless you show it to other parties.

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: CC4/ICS18012334/NEB3Q2

Date: 10/10/2018

REFERENCE

| | | | |
|------------------------------|---------------|-----------------------------|--------------|
| Handling Insurer: | ECICS Limited | Policy No: | |
| Claimant Vehicle No : | SHD4879P | Insured Vehicle No : | SKV2617L |
| Date of Loss: | 04/07/2018 | Nature of Claim: | TP |
| | | Claim No: | DMPC1800274H |

DESCRIPTION & IDENTIFICATION OF VEHICLE

| | | | |
|-----------------------------|-----------------------------------|-------------|-------------------|
| Reg No: | SHD4879P | | |
| Make & Model: | HYUNDAI I40, 1.7 D (A) | Engine No: | D4FDEU429923 |
| Reg. Date: | 12/03/2014 (Man. Year: 2014) | Chassis No: | KMHLB41UMEU048689 |
| Colour: | Blue | Odometer: | 706359 km |
| Engine Capacity: | 1685 cc | | |
| Market Value/New Car Price: | N/A | | |
| Sum Insured (S\$): | Market Value/New Car Price | | |

CONDITION OF VEHICLE AT THE TIME OF SURVEY

| | | | | |
|--------------------------|-------------------------|----------------------|--------------------------|-------------------------|
| General Condition: | Steering (Serviceable): | Yes | Footbrake (Serviceable): | Yes |
| Handbrake (Serviceable): | Yes | Engine Modification: | No | Pre-accident Condition: |

CONDITION OF TYRES

| | | | |
|-------------------|----------------|------------------|----------------|
| Front Tyre Size: | 215/60 R16 | Rear Tyre Size: | 215/60 R16 |
| Front Left Side: | West Lake 6 mm | Rear Left Side: | West Lake 6 mm |
| Front Right Side: | West Lake 6 mm | Rear Right Side: | West Lake 6 mm |

The above values represent the remaining tyre treads depth

| COST OF CLAIMS | Repairer's | Adjuster's | Difference | Diff % |
|--|-----------------|-----------------|-----------------|--------------|
| Parts | 1,215.28 | 595.20 | 620.08 | 51.02 |
| Miscellaneous Items | 0.00 | 0.00 | 0.00 | |
| Labour | 1,110.00 | 800.00 | 310.00 | 27.93 |
| Paintwork Labour | 0.00 | 0.00 | 0.00 | |
| Towing | 0.00 | 0.00 | 0.00 | |
| Calculated Gross Total (S\$) | 2,325.28 | 1,395.20 | 930.08 | 40.00 |
| Approved Total (Overridden) (S\$) | | 1,100.00 | | |
| (S\$) | 2,325.28 | 1,100.00 | 1,225.28 | 52.69 |
| + GST 7.00/7.00% (S\$) | 162.77 | 77.00 | 85.77 | 52.69 |
| Nett Amount (S\$) | 2,488.05 | 1,177.00 | 1,311.05 | 52.69 |

INSPECTION

| | | |
|---------------------|--------------------------|--|
| Date of Assignment: | 06/07/2018 | |
| Date Inspected: | 06/07/2018 Inspected At: | ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969 |

Estimated Period of Repair: 3.0 days

Adjuster: Muhammad Nazril Bin Abdullah

Manager: Asher Sng Rong Yi

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

| | |
|---|---|
| Reference | |
| Part Source: MRM-SG | Version: 1.0 (Last Synchronised: 05 Oct 2018) |
| Parts: 143 | HYUNDAI I40 1.7 D (A) (Catalogue:Merimen Singapore 1.0) |
| Labour: Repairer's | (Price-denominated Standard List) |
| Print Code: (Unsubmitted, no print-code for SHD4879P) | |
| Validity: These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page | |
| Further Info: Items/values not in reference catalogue are prefixed with an asterisk *. | |

Recommended Parts

| No. | Qty | Part No. | Particulars | Condition | Repairer's | Amount | |
|-----|-----|----------|-------------------------------------|-------------|--|-----------------|---------------|
| 1 | 1 | | *FRONT BUMPER COVER | Repair | 562.30 FL | *- FL | |
| 2 | 1 | | *FRONT BUMPER BRACKET (LH) | Serviceable | 24.60 FL | *- FL | |
| 3 | 1 | | *FRONT BUMPER RETAINER MOUNTING | Serviceable | 9.20 FL | *- FL | |
| 4 | 1 | | *FRONT FENDER (LH) | Dented | 619.00 FL | *619.00 FL | |
| 5 | 1 | | *FRONT FENDER SHIELD (LH) | Serviceable | 169.80 FL | *- FL | |
| 6 | 1 | | *FRONT FENDER RETAINER | Serviceable | 9.20 FL | *- FL | |
| 7 | 1 | | *FRT FENDER ADVERTISEMENT LOGO (LH) | Necessary | 100.00 FS | *100.00 FS | |
| | | | | | Sub Total (\$\$) | 1,494.10 | 719.00 |
| | | | | | - List Item Discount on L Items 20.00/20.00% (\$\$) | 278.82 | 123.80 |
| | | | | | Total Parts (\$\$) | 1,215.28 | 595.20 |

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

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

| No | Particulars | Lab.Type | Repairer's | Amount |
|---------------------------------|-----------------------|----------|-----------------|---------------|
| <u>Labour Items</u> | | | | |
| 1 | PANEL BEATING | New | 560.00 | 400.00 |
| 2 | SPRAY PAINTING CHARGE | New | 500.00 | 400.00 |
| 3 | TUFF KOTE | New | 50.00 | 0.00 |
| Gross Labour Cost (\$\$) | | | 1,110.00 | 800.00 |

Report was unsubmitted during this print-out.

< END OF ESTIMATES >