

(1/2018)

INS. CASE OWNER:

vale

CC 4 AXA1801

V515, K w b 3

LKC:
IDAC:

Surveyor:

Kenneth

DOI:

ASSIGNMENT

13/11/18

Date / Time:

10/5/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLA 12475

Claim No.:

SKMOUNAP/56187

Name of Insured:

ZAMIRAH BEE BINTI ABU MUYEED

Policy No.:

CN876480

Insured Tel No.:

HP: 97620510

Make / Model:

BMW

Excess Sec II : \$5

D.O.A: 2/2/18

Place of Accident:

YISHUN OPP KTM18 MRT

Is driver the owner?

(ES / 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



INSRS:

WSP:

Tel:

Liability:

RMKS:

Motor image



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

11/5/18
vinan

4KV 22497-7

SLA 12475-4

STAGE

DATE / PIC

Non-Reporting Itr (1st):

Non-Reporting Itr (2nd):

Non-Reporting Itr (Final):

Notification Itr (if non-pickup):

Call OI

After call Itr to OI

Documentation Check List: Handler Typist

Notification Itr (if non-pickup)

After call Itr 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:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

\$5

(days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

5/8/19

Confirm with:

Siow Hooi

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia:

Repair Cost:

\$5

1626.40

Loss of Rental (LOR):

\$5

(days)

Loss of Use (LOU):

\$5

200.00

(5 100 x 2 days)

Loss of Income (LOI):

\$5

(5 x days)

LOR only

LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

\$5

2.00

Medical:

\$5

Disbursement:

\$5

(e.g. Tow/ Independent)

Legal Cost

\$5

Total:

\$5

1828.40

Global Sum \$5:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$5

1828.40

Name 1:

Motor Image enterprises Pte Ltd

Payee 2: (Strike if N.A.)

\$5

Name 2:

Payee 3: (Strike if N.A.)

\$5

Name 3:

ASS. REC. BY:

REF: 1441

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Rpt:

Consistent?: Yes or No

GIA / PR Seen:

Consistent?: Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

1.91 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

14/11

File pass to Catherine

18/11

Confirm 2-B 1 \$1520.00 with 2 working days

Date/Time, File Pass to?

☐

Prel. 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:

Transportation:

S + RS \$

Fees

Others

TOTAL

Veh No:

SKV 3249J

Yr Regn:

09, 15

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

Truck / Trailer or

Wagon

Make:

Subaru Forester

c.c.

1995

Colour:

M. Silver

A/C:

Insured / Std / Nil / NA

Sp. Reading

56165

T/Radio:

Insured / Std / Nil / NA

Eng/No:

C/No:

JF1ST5K65F6056079

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

Inorder / Jammed / Leaked / Burnt or

Brake:

Inorder / Jammed / Leaked / Burnt or

Mod:

Nil / S/Rim / STD/Rim or

Tyre Size:

F:

225/60R17

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

4

mm

R/Bal.

7

mm

L/Bal.

4

mm

L/Bal.

7

mm

D.O.A.

3/7/18

D.O.I.

13/11/18

Survey held at

Des. of Damages:

Frt / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

(Rd. \$2900.00
66%)



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD			Ref : CC4/ASM18012515/wb3	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811			Date : 10-07-2018	
			Code : ASM	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLQ 1247S	Veh. Inspected	SKV 3249J	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	10/07/2018	
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	03/07/2018	Inspection Date		
Survey held at	MOTOR IMAGE ENTERPRISES PTE LTD 19 TOA PAYOH LORONG 8 SINGAPORE 319255			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SKV3249J

S/NO	PARTS DESCRIPTION	PARTS NUMBER	DAMAGED PARTS & PRICES			S/LIST REMARKS
			NETT	LIST	S/NETT	
1	REAR BUMPER ASSY	57704SG012	540.00	✓		
2	BRKT CORNER R RH	57707SG060	18.00	X		
3	BRKT CORNER R LH	57707SG070	18.00	X		
4	BRKT SD R RH	57707SG080	14.40	X		
5	BRKT SD R LH	57707SG090	14.40	X		
6	BEAM COMPL R EU	57711SG0219P	288.00	7X		
7	CARGO STEP PANEL S/S	E7710SG000	460.00	✓		
SUB TOTAL			1352.80	0.00	0.00	0.00
LESS DISCOUNT (NETT-20 %)			270.56	0.00	0.00	0.00
GRAND TOTAL			1082.24	0.00	0.00	0.00
OVERALL TOTAL			1082.24			

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

List
 \$540.00
 + \$460.00

 \$1,000.00
 20%

 \$800.00

MOTORIMAGE ENTERPRISES PTE. LTD.
19 LOHONG 8, TOA PAYOH
SINGAPORE 319255

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SKV3249J

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	TPCLAIM	CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST SLQ1247S - AXA		
2	ZZ/001	CONDUCT TP CLAIM AXA LOCATION:YISHUN AVENUE 2 DATE:03/07/2018 TIME:1845HRS		
3	ZZ/002	REPAIR/REPLACE REAR BUMPER AND PANEL	1680.00	2801
4	ZZ/003	RESPRAY REAR BUMPER AND PANEL	1260.00	4201
5	ZZ/004	TO SUPPLY & INSTALL REVERSE SENSOR-2- ETES	300.00	? X 00
6	ZZ/005	SUNDRIES <i>NH</i>	100.00	201
TOTAL LABOUR CHARGES			3340.00	

\$720.00

\$800.00
+ \$720.00

\$1,520.00
Plp

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SKV3249J

TOTAL LABOUR CHARGES	3340.00
TOTAL SPARE PARTS CHARGES	1082.24
<hr/>	
GRAND TOTAL	4422.24 *
<hr/>	

* All charges do2 not include GST.

SURVEYOR'S PARTICULARS

NAME	:	
SURVEYED DATE	:	
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00
LIABILITY	:	0.00
REMARKS	:	

Not Authorized
Respray B4 paint
2 days

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey damaged parts during survey
- To display damaged parts during survey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No legal proceedings will be raised
- Supplementary items must be resurveyed and
is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

PLS NOTE : This estimate is based on visual inspection of the
affected vehicle. Should we require further labour
charges & spare parts in the process of repairs, we
shall inform you accordingly.

MOTORIMAGE ENTERPRISES PTE. LTD.
19 LORONG 8, TOA PAYOH
SINGAPORE 319255

ESTIMATE : ACCIDENT/BODY REPAIRS
WORKSHOP : TOA PAYOH
CONTACT NO : 64730333
REFERENCE : INS/IC/CHI/0838/2018
DATE : 06-JUL-2018

AXA INSURANCE PTE LTD
8 SHENTON WAY
#27-01 AXA TOWER
S(068811)
TEL : 63387288
FAX : 68804838/ 3382522
MS LINA EXT: 824

OWNER'S NAME : LOW MOH KHONG
ADDRESS : APT BLK 824 YISHUN STREET 81
#06-592
S(760824)
TELEPHONE NO : 96215483

TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 2100428538
VEHICLE NO : SKV3249J
MODEL CODE : SJ5CK7C
MODEL/YEAR : FORESTER 2.0I-L AWD CVT
ENGINE NO : FB201781452(5Y100K)
CHASSIS NO : JF1SJ5KC5PG056079
MILEAGE : 1 KM
DATE IN : 06/07/2018
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : KUAN WEI LOONG**
ACCIDENT DATE : 03/07/2018

Print Date : 06/07/2018
Print Time : 18:24:58



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAVA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Immediate Advice

To : AXA Insurance Pte Ltd

Date: 18/07/2019

Survey Details:

Date of loss	3-Jul-18
Date of appointment	10-Jul-18
Date of survey	13-Nov-18
Location of survey	MOTOR IMAGE ENTERPRISES PTE LTD

Vehicle Details:

Claim Type:	Third party
Vehicle number	SKV 3249J
Make and Model	SUBARU FORESTER 2.0I-L CVT AWD SR
Date of registration	12/9/2015
Excess	
Market Value	\$78,000
Part Rebate	\$50,127
Nett Loss	\$27,873

Repair details:

Initial Estimate	\$ 4,422.24
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 800.00	list price -20%
Check items (estimate)	\$ -	
Labour	\$ 720.00	
Total	\$ 1,520.00	
Lump Sum(if applicable)	\$ -	

Number of days for repair	2
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Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Remarks:

We have not authorized repairs.

Mandate:

Liability(TP)		100%	
Proposed repair cost	\$	1,626.40	(\$1,520.00 +7%gst)
Loss of use	\$	200.00	(\$100.00 x 2 days)
Loss of rental	\$	-	
Loss of income	\$	-	
GIA search fees	\$	2.00	
Others	\$	-	
Proposed Total	\$	1,828.40	

English (default) ▼

LKK AUTO CONSULTANTS PTE LTD (TP) ▼



SERVICE REQUESTS

MESSAGES

CLAIMS

<<

TP MANDATE IA < S8M00NAP>

Type

🔗 Question

Message

Dear Vale, Liability: Insured collided into the rear of third party vehicle, Liability is down against our insured. We have send letter to OI to notify TP claim and NCD issue on 8th November 2018. Immediate Advice (with mandate) have been uploaded in SMART CLAIM. We hereby seek your approval to offer Third Party repairer M/s "Motor Image Enterprises Pte Ltd" is as follows: - 1) COR(w/gst): \$1,626.40 + 2) Loss of Use (2 days x \$100.00): \$200.00 + 3) GIA: \$2.00 = Total: \$1,828.40. **2days recommendation for repair. **All the relevant documents had been uploaded in SMART CLAIM. For your approval please.
PohKin- LKK- 18/07/2019






Service Request Details

Claim

S8M00NAP

Reference

None 

Loss Date

July 3, 2018

Request Date

July 9, 2018

Due Date

July 16, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

09072018 @ 2:12pm
Daniel veh not in

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

SKV3249J

Make

TPVD SUBARU

Model

FORESTER-2.0 AWD (A)

Service Address

...

Primary Contact/Insured

ABDUL MAJEED ZAHIRAH BEE BINTE

BLK 219 SERANGOON AVENUE 4, #02-206, 550219, Singapore

97630510

ZAHIRAHBEE@GMAIL.COM

Claim Handler

OH Vale

6568804897

vale.oh@axa.com.sg

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

TYPE



SENT

7/9/18 1:50 PM

FROM

OH Vale

SUBJECT

YOU MAY PROCEED ON DS BUT TO GET MANDATES ON
QUANTUM-VO

BODY



<< Re:TP MANDATE IA < S8M00NAP>

Type

🔔 Question

Message

Hi Pls proceed, tks-VO

[Reply](#)

BREAKDOWN OF PAYMENT

VEHICLE NO : SKV 32493

ACCIDENT ON 03/07/2018 AT Yishun Avenue 2

INVOLVING VEHICLE/S SL012475

- 1) Repair cost \$..... 1626.40 Payable to Motor Image Enterprises Pte Ltd
- 2) GIA or LTA
Search fees \$..... 2.00 Payable to Motor Image Enterprises Pte Ltd
- 3) Medical fees \$..... Payable to
(\$120 x 2days)
- 4) Loss Of Use or
Rental-Car \$..... 240.00 Payable to Low Hon Khong
- 5) Total Claim Amount \$..... 1868.40

* KINDLY SEPARATE THE PAYMENT IN 2 CHEQUES

*Contact person: Siow Hooi - 6703 8115
hooi@motorimage.net



Auto
Consultants
Pte Ltd

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

08 November 2018

Zahirah bee Binte Abdul Majeed

Blk 219 Serangoon Ave 4

#02-206

Singapore 550219

Dear Sir/ Mdm

OUR REF : CC4/ASM18012515/fb3

YOUR REF : SLQ 1247S

**ACCIDENT INVOLVING SLQ 1247S & SKV 3249J ALONG YISHUN OPP KHATIB MRT
ON 03/07/2018**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from **MOTOR IMAGE ENTERPRISES Pte Ltd** acting on behalf of the owner of SKV 3249J against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to Vivianlau@lkkauto.com within 7 days **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim



Auto
Consultants
Pte Ltd

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

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us 6841 8625 or email us at Vivianlau@lkkauto.com

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Vivian Lau
Case Handler
DID: 6841 8625
FAX: 6741 4108
EMAIL: Vivianlau@lkkauto.com

c.c. AXA Insurance Pte Ltd
(Motor Claims Dept)

Motor Image Enterprises Pte Ltd


- ☒ Toa Payoh Service Center, 19, Lorong 8, Toa Payoh, Singapore 319255
☐ Leng Kee Service Center, 25, Leng Kee Road, Singapore 159097

Type of Claim:

- ☒ Third Party (Direct Settlement)
☐ Own Damage (Recovery Claim)

ACCIDENT INVOLVING VEHICLE REGISTRATION No. SKV 3249J AND SLQ 1247S
 ON 03RD JULY 2018 AT YISHUN AVE 2

1. I, the owner of vehicle no. SKV3249J hereby instruct you and authorise you to act for me with respect to the following: -
 - (a) To submit my claims for all losses including uninsured loss, rental car charges, medical fees, excess payment and cost of repairs.
 - (b) To settling my claim as they deem fit, including settling the matter on basis of my contributory negligence if any.
 - (c) To receive payment for settlement of my claim where all payment is to be made payable to the repair workshop for cost of repairs and other uninsured losses.
 - (d) To sign discharge voucher on my behalf.
2. I further acknowledge that any settlement that workshop may reach on my behalf is on a without prejudice basis and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle is concerned.
3. In the event that I am required to attend meetings, interviews, court and/or provide statements or any information in connection with my claim, I shall render full cooperation.
4. In the event that my claim against the third party or his insurers is not successful or cannot be proceeded with or if any settlement is not honoured or satisfied by the third party or his insurers, I authorise you to revert to my own insurers for the cost of repairs and any losses recoverable under my policy of insurance. In this respect, I understand and accept that the excess amount applicable under the policy of insurance shall be borne by me.
5. If for whatever reason, my insurers reject my claim for indemnity for the cost of repairs and/or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I agree and undertake to pay the difference between what was claimed and paid out by the insurers or the full amount of my repair bill and survey fees and any other expenses reasonably incurred on my behalf or to pay you the difference in amount, as the case may be.
6. I undertake to state truthfully and to make full and frank disclosure of all facts leading up to and of the accident and of any action and/or omissions in connection with my part in the accident. If any facts stated are inaccurate and my claim cannot be paid out or fails, I agree that I shall be liable to you for the repair and other costs incurred by you.
7. I further undertake to sign any document or discharge voucher that is required for the purposes of my claim and if as a result of my failure to do so, my claim cannot be paid out or is delayed, I agree that I shall be liable to you for the repair and other costs incurred by you.
8. I understand that the claim for loss of use of my vehicle will be based on the number on the days estimated by the surveyor in his report for the required repair. The actual number of days may be more due to unavailability of parts, weekend, holidays and other operational exigencies and I accept that it may not be possible to claim for these extra days. In addition, any contributory negligence part of my claim can also affect portion of my claim for loss of usage.
9. I shall keep you informed of any correspondence and/or summons that I may receive in connection with the accident before agreeing to pay or receive any monies due under this claim.
10. In the event, the insurers pay the claimed amount to me instead of you, I will inform you as soon as possible and reimburse you for the repair and other costs incurred by you.
11. For successful recovery of upfront Excess payment by claimant, the workshop shall effect refund accordingly to the mode of upfront payment.
 - a) For upfront Excess payment by credit card, the refund shall be credited to the respective Credit Card Account via Credit Card Company handling the transaction.
 - b) For Excess payment by cash, the workshop shall refund the amount to the claimant via cheque payment.

Claimant's Particulars		Authorized Workshop	
Name <u>LOW MOH KHONG</u>		Company Name <u>MOTORIMAGE ENTERPRISES PTE LTD</u>	
Address <u>APT BLK 824 YISHUN ST 81</u>		Claim Officer's Name <u>DANIEL A JUDE</u>	
#06-592 S(760824)			
Telephone No <u>9621 5483</u>		Telephone No <u>6703 8101</u>	
Date <u>13TH NOV 2018</u>	Email	Date <u>13TH NOV 2018</u>	
Company Stamp [For Co Regn Vehicle]	Authorized Signature 	Claim Officer Signature 	



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLQ 1247S (Insd veh)	Model: <u>SUBARU FORESTER</u>
	SKV 3249J (TP veh)	
Date of Accident/ Time:	03/07/2018	

Repair Estimate	\$	4,331.80	
Final Repair Cost	\$	1,626.40	
Loss of Use	\$	200.00	02 days at \$100.00 per day
Rental (if any)	\$		days at \$ per day
LTA / GIA Search Fee	\$	2.00	
Others:	\$		
Final Settlement Sum	\$	1,828.40	
Payee Name: <u>MOTOR IMAGE ENTERPRISES PTE LTD</u>			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <u>No</u> BOLA Scenario No: <u>27</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

 Signature of workshop representative / Workshop stamp Name of Representative: <u>Stew Hooi</u> Date: <u>05/07/2019</u>	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Daniel A Jude</u> Date: <u>05/08/2019</u>
  Signature of AXA's surveyor/representative: Name of AXA's surveyor / Representative: Date:	

**Motor Image Enterprises Pte Ltd**

19 Lorong 8 Toa Payoh Singapore 319255

Service Centre Tel: (65) 6703 8101 / 102 Fax: (65) 6253 5535

25 Leng Kee Road Singapore 159097

Service Centre Tel: (65) 6703 8163 Fax : (65) 6479 1137

Website: www.motorimage.net

**TAX INVOICE**

GST Reg No. M2-0076975-9

Co. Reg No. 198702032R

Sales: INSURANCE CUSTOMER**Invoice No: L491954**For cash sales, payment will be
endorsed on this invoice and no
separate receipt will be issued.**DATE REC'D: 13-Nov-2018****SERVICE ADVISOR: HOOI****JOB No.: L491164****MILEAGE: 56166****ID:**

NAME: AXA INSURANCE PTE LTD
ADDRESS: 8 SHENTON WAY
 #27-01 AXA TOWER, S(068811)
TELEPHONE: 63387288
MODEL: FORESTER 2.0I-L AWD CVT
ENGINE No.: FB201781452(5Y100K)
CHASSIS No.: JF1SJ5KC5FG056079
REGISTRATION No.: SKV3249J

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
1	TPCLAI CONDUCT BODYWORK REPAIR (THIRD PARTY CLAIM) AGAINST SLQ1247S - AXA	
2	REMARK CONDUCT TP CLAIM AXA LOCATION: YISHUN AVENUE 2 DATE: 03/07/2018 TIME: 1845HRS	
3	INS01 FOR ACCIDENT CAR OR REPAIR JOB QUOTATION, AN ADMINISTRATIVE CHARGE WILL BE IMPOSED IF VEHICLE	
4	INS02 IS WITHDRAW AND TOWED OUT FOR REPAIR. REFER TO STANDARD RATE CHART (REF. 0338).	
5	INS03 STORAGE CHARGES OF \$30/DAY WILL BE IMPOSED FROM THE DATE OF CONFIRMATION OF AUTHORISATION BY THE	
6	INS04 SURVEYOR SHOULD THE OWNER DECIDE NOT TO CARRY OUT THE REPAIR IN MOTORIMAGE ENTERPRISES PTE LTD.	
7	INS05 INSTRUCTIONS WILL BE TAKEN FROM THE OWNER ONLY. IF IT IS NOT POSSIBLE, AN AUTHORISATION LETTER FROM	
8	INS06 THE OWNER IS REQUIRED.	
9	INS07 CUSTOMER ARE INFORMED AND ACCEPT THAT NUMBER OF DAYS FOR LOSS OF USE IS BASE ON THE FOLLOWING:	
10	INS08 NO.OF DAYS FOR LOSS OF USE RECOMMENDED BY INS.CO. APPOINTED SURVEYOR NO FURTHER CLAIM CAN BE ALLOWED	
11	INS09 CUST ACK THAT CLAIMS NOT EXCEEDING \$3,000 & ABOVE WILL HAVE TO BE REFER TO FIDREC DIRECTLY.	
12	REMARK REPAIR/REPLACE REAR BUMPER AND PANEL	280.00
13	REMARK RESPRAY REAR BUMPER AND PANEL	420.00
14	REMARK SUNDRIES	20.00
	TOTAL(LABOUR)	720.00
1	BUMPER FACE R 57704SG012(Qty : 1 @ 540.00 each(Discount 20.00%))	432.00
2	CARGO STEP PANEL S/S	368.00

Certified True Copy



Motor Image Enterprises Pte Ltd
19 Lorong 8 Toa Payoh Singapore 319255
Service Centre Tel (65) 64170100/101 Fax (65) 62535535
25 Leng Kee Road Singapore 159097
Service Centre Tel (65) 64764776 Fax (65) 64791137
Website: www.motorimage.net



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ENGINE No.: F8201781452(5Y100K)
CHASSIS No.: JF1SJ5KC5FG056079
REGISTRATION No.: SKV3249J

ITEMS CODE	DESCRIPTION OF REPAIRS	AMOUNT
	E7710SG000(Qty : 1 @ 460.00 each(Discount 20.00%))	
	TOTAL(SPARE PARTS)	800.00

Subtotal	1,520.00
GST(7%)	106.40
TOTAL	\$1,626.40

DATE : 30-Jan-2019

CUSTOMER



MANAGER

The customer acknowledges and confirms by taking delivery of the vehicle and/or upon receipt of this invoice, either personally or by an agent that his/her complaints relating to the vehicle have been rectified to his/her satisfaction and that the Company's liability for defective work and/or materials will be limited to rectification works and/or replacement of parts without charge or at discounted charge, at the Company's option. The customer further acknowledges that any discrepancy in this invoice (with the exception of errors and omissions) must be brought to the Company's attention in writing within three(3) days from the date of this invoice failing which it will be deemed correct.

CUSTOMER

Not yet a DUO Member? Join us now at www.DUO.com.sg and start accumulating your points for your invoice today!

Certified True Copy



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-18-102202
Date of Request: 04/07/2018

Your Ref No: Online Purchase

Motor Image Enterprises Pte Ltd
19 Lorong 8 Toa Payoh
Singapore 319255

Dear Sir/Madam,

Enquiry Date 04/07/2018
Enquiry By Lim Po Beng
TP Vehicle No. SLQ1247S
Accident Date 03/07/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile				
AXA INSURANCE PTE LTD		Ref : CC4/ASM18012515/Kwb3q2		
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:VALE OH		Date : 19-08-2019		
		Code : ASM		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SLQ 1247S	Veh. Inspected	SKV 3249J	
Policy No.	CN836480	Coverage (\$)	0.00	
Claim No.	S8M00NAP	Excess (\$)	0.00	
Assign From		Assign Date	10/07/2018	
2. Vehicle Particulars & Condition				
Make & Model	SUBARU FORESTER	c.c	1995	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	JF1SJ5KC5FG056079	Colour	METALLIC SILVER	
Odometer	56165	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/60 R17	YOKOHAMA	4 mm	
L/H Front Tyre	225/60 R17	YOKOHAMA	4 mm	
R/H Rear Tyre	225/60 R17	YOKOHAMA	7 mm	
L/H Rear Tyre	225/60 R17	YOKOHAMA	7 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	03/07/2018	Inspection Date	13/11/2018	
Survey held at	MOTOR IMAGE ENTERPRISES PTE LTD 19 TOA PAYOH LORONG 8 SINGAPORE 319255			
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:		2 Working Days		



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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKV 3249J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER ASSY (N) (CONSISTENT)	DENTED	540.00	540.00
1	BRKT CORNER R RH (N) (CONSISTENT)	SERVICEABLE	18.00	-
1	BRKT CORNER R LH (N) (CONSISTENT)	SERVICEABLE	18.00	-
1	BRKT SD R RH (N) (CONSISTENT)	SERVICEABLE	14.40	-
1	BRKT SD R LH (N) (CONSISTENT)	SERVICEABLE	14.40	-
1	BEAM COMPL R EU (N) (CONSISTENT)	NOT NECESSARY	288.00	-
1	CARGO STEP PANEL S/S (N) (CONSISTENT)	DENTED	460.00	460.00
	LESS 20% DISCOUNT		-270.56	-200.00
			1,082.24	800.00
SPECIAL NETT ITEMS				
1	SUNDRIES (SN) (CONSISTENT)	NECESSARY	100.00	20.00
			100.00	20.00
LABOUR				
	REPAIR /REPLACE REAR BUMPER AND PANEL		1,680.00	280.00
	RESPRAY REAR BUMPER AND PANEL		1,260.00	420.00
	TO SUPPLY & INSTALL REVERSE SENSOR	NOT NECESSARY	300.00	-
			3,240.00	700.00
GRAND TOTAL			4,422.24	1,520.00
RECOMMENDED COST OF REPAIRS				1,520.00

Report Ref No. CC4/ASM18012515/Kwb3q2

KONG SENG CHEONG

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.

Service Request Details

Claims	SIRIMODUNAP
Reference	CC4/ASM18012515/kwks02
Loss Date	3 July 2018
Report Date	4 Jul 2018 12:00:00 AM
Request Date	9 July 2018
Due Date	

Actions

Next Step

Wait for Approve Invoice

Add Invoice

Vehicle Information

Incident Vehicle Registration #	SKV3249J
Make	TPVO SUBARU
Model	FORESTER-2.0 AWD (A)

Service Address

Primary Contact/Insured

ABDUL MAJEED ZAHIRAH BEE BINTE
BLK 219 SERANGOON AVENUE 4, #02-20A,
550219, Singapore
97630510
ZAHIRAHBEE@GMAIL.COM

Claim Handler

OH Vale
6568804897
vale.oh@axa.com.sg















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SLQ12475 INS CIA	Report & Statement	GIA Report	Marjimen	

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 LKXInvoice1_171.pdf	Invoice	Surveyors' Assessor expense	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LKXInqueston_121.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 LKXAdjustment1a_121.pdf	Forms / Claim Documents	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 PAYMENT BREAKDOWN_EXPRESS SETTLEMENT FORM.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 AUTHORIZATION TO ACT FORM.pdf	Forms / Claim Documents	POA / Authority Letter	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 WORKSHOP INVOICE_0001.pdf	Invoice	Regulator	LKX AUTO CONSULTANTS PTE LTD (TP)	20 August 2019
 Immediate Advice (with mandated) dated 18.07.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 LKX RESURVEY PHOTO.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 LKX SURVEY PHOTO.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 TP Estimate-Marked revise.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 Letter to O1.pdf	Letters and Correspondence	Policy Holders / Insured	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 GIA search file.pdf	Forms / Claim Documents	Claim Form	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 TP ESTIMATE- MARKED.pdf	Reports & Statement	Others	LKX AUTO CONSULTANTS PTE LTD (TP)	18 July 2019
 EMAIL FROM WORKSHOP.mng	Other	Other	CHINWAI Namrata	20 October 2018

