

ASS. REC. BY:

REF

CSLMSG18013110/ Uvd3e2

Special Instruction:

Survivor
merimen

Mamas

From (Person):

Elaine Ngu

ASSIGNMENT (Office)

of MSIG

Date/Time: 18/7/18 @ 4.0/pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLH 2958P

Insured:

SJU 7370G

at Workshop m/s

Trans Eurokars

Tel:

91277 928

of

5 Ubi close

Policy No:

28992904QMX

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 10/06/2018

20/7/18 @ 4pm ow

CA / REV / REP. / REV 24 HRS

1up

H.O.D. Endorsement:

Date/Time:

9.01am @ 19/7/18

Person Contacted:

Ronald

Vehicle IN OUT

Date/Time	Action/Instruction (✓) Estimate
	SLH 2958P-X
	SJU 7370G - NS/INC17010270 / K/vbm2 DOA: 06/05/2017
23/7/18	Send preli revised via merimen
14/11/18	Submit preli report

(08/11/13) wef

REF: M81G

ASS. REC. BY:

ASSIGNMENT

From: _____ Date: 20/07/2018

Estimated Cost: _____

OD ☒ TP ☐ WS ☐ TP RES ☐ OD RES ☐ EVA ☐ INV ☐ MVTo Inspect Vehicle No: SLH 2958P
at Workshop m/s Trins Eurokurs
of 5 ubi Close

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

GLA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

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

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLH 2958P Yr Regn: 10, 16

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

Truck / Trailer or CA /

Make: mercedes 2 c.c. 1496

Colour: wh-te A/C: Insured / Std / NI / NA

Sp. Reading: 55970 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MM6DL 2SAA6W 186315

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60R16
R: _____

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

TOYO / YOKO or

Front

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

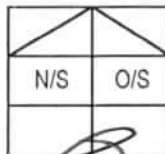
L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 10/6/18 D.O.I. 20/7/18

Survey held at _____

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

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



RECEIVED 15 NOV 2018

Date / Time Action / Instruction

14/11/18 Summit check with Ronald vehicle has not sent in for repair

Date/Time, File Pass to?

☒ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) 14/11 - typist

Report Format: merimen

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

Days Of Repair: 2

Resurvey No. of Trip: -

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee: 150

Transportation: _____

S + RS, SI

Photos

Others

TOTAL

10

160



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

MSIG INSURANCE (SINGAPORE) PTE LTD

Ref : CS/MSG18013110/Uvd3

16 RAFFLES QUAY
#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 19-07-2018



Code : MSG

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SJU 7370G	Veh. Inspected	SLH 2958P
Policy No.	28992904QMX	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	MERIMEN (ELAINE NGU)	Assign Date	19/07/2018

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	10/06/2018	Inspection Date
Survey held at	TRANS EUROKARS PTE LTD NO 5 UBI CLOSE SINGAPORE 408605	

5a. Remarks

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

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

To: MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way
#21-01 SGX Centre 2
Singapore 068807

From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn: Elaine Ngu Siau Mei

Date: 23 Jul 2018

Preliminary Advice

Insured Vehicle No	: SJU7370G		
TP Vehicle No	: SLH2958P	Accident Date	: 10/06/2018
Make	: MAZDA MAZDA5	Assignment Date	: 18/07/2018
Date of Inspection	: 20/07/2018	Est. Duration of Repair	: 2.00
Inspection At	: TRANS EUROKARS PTE LTD (HQ) 5 UBI CLOSE SINGAPORE 408605		

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	4,896.16
Revised Amount	:S\$	2,719.43
Check Items (Estimated)	:S\$	0.00
Total	:S\$	2,719.43

Lump Sum Repair	:S\$	
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Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	
COE / PARF Rebate	:S\$	
Salvage Value	:S\$	
Margin for Repair	:S\$	

Remarks

() The vehicle is economical/not economical for repair.

(X) The above survey was conducted on a 'without prejudice' basis.

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	10 Jun 2018		18 Jul 2018 16:01 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	YEONG HWEE TOI, ID: S7630287A		
Main Claimant:	LIM KEOW TECK, ID: S7112970E		
Vehicle Reg. No.:	SLH2958P	Date of Loss:	10/06/2018 01:00 - :59 [19 Months and 13 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP	Policy/Cover Note No.:	28992904QMX (Comprehensive) Coverage: 22/07/2017 - 23/12/2018
Vehicle Reg. No. (Insured):	SJU7370G	Policy No. (Claimant):	
		Excess:	S\$500.00
Repairer:	Trans Eurokars Pte Ltd (HQ) 5 Ubi Close, 408605 Ubi - Tel:		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 19/07/2018]		
Adj Asg. Remarks:	LIABILITY UNCLEAR-OI NON REPORTING TP AGREE APPOINT LKK -MARCUS CHUA Please move the requested timing to 4PM tomorrow, 19 July FOR SURVEY CONTACT RONALD YAP FOR APPOINTMENT:63958899 / 91277928		

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.									

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	2970E
Vehicle Details	
Vehicle No.:	SLH2958P
Vehicle to be Exported:	No
Intended De-registration Date:	23 Jul 2018
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA2 SEDAN 1.5L SP.6EAT (LED)
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	P520344102
Chassis No.:	MM6DL2SAAGW186315
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$18,162.00
Original Registration Date:	28 Oct 2016
First Registration Date:	28 Oct 2016
Transfer Count:	0
Actual ARF Paid:	\$13,162.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Oct 2026
PARF Rebate Amount:	\$9,871.00
Intended COE Rebate Details	
COE Expiry Date:	27 Oct 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,991.00
COE Rebate Amount:	\$42,122.00
Total Rebate Amount:	\$51,993.00

The information contained herein is correct as at 23 Jul 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	11/06/2018 12:37
Date Of Accident	10/06/2018 01:35
Exact Location Of Accident	AT WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH2958P
Insured/Policyholder	
Name Of Registered Owner	LIM KEOW TECK
NRIC No	S7112970E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91823327
Alternative Phone No	OTHERS-91823327

Vehicle Particulars

Manufacturer	MAZDA
Model	2-1.5 SEDAN L SP.6EAT (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00411998
Cover Note Number	

Driver

Name of Driver	LIM KEOW TECK
NRIC No	S7112970E
Date Of Birth	21/04/1971
Occupation	INDOOR
Date Of Driving Pass	26/10/1993
Driving Experience	24 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91823327
Fax Number	
Contact Number	OTHERS-91823327
Email Address	NOEMAIL

Address	BLK 677A JURONG WEST ST 64 #11-267
Postcode	641677
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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

KINDLY REFER TO SKETCH PLAN.

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	SJU7370G
Vehicle Make/Model/Colour	CHEVROLET
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEONG HWEE TOI
NRIC/Passport Number	S7630287A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

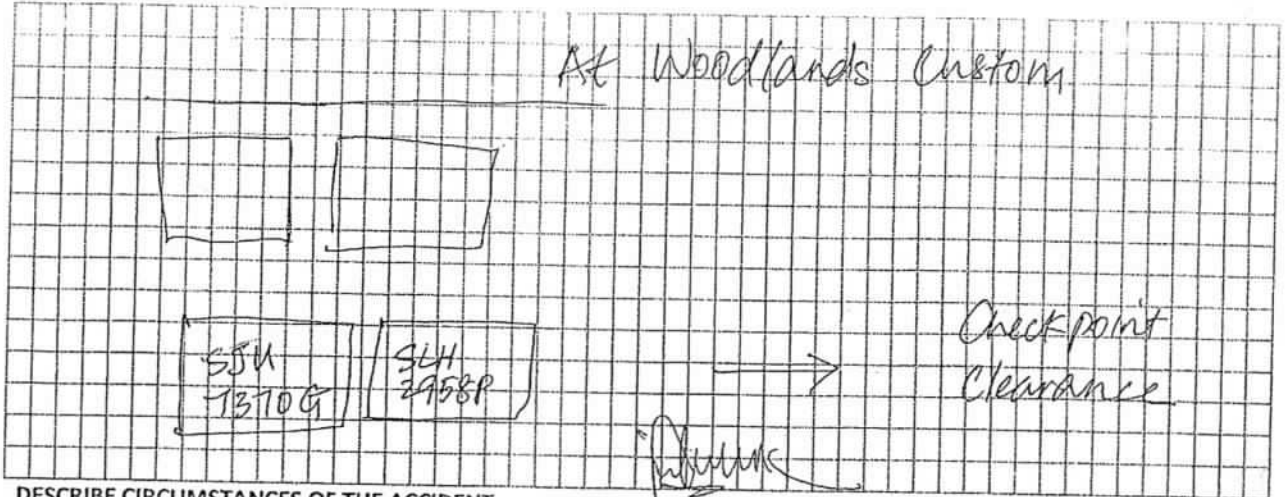

Policyholder's Signature
Date & Time: 11/6/18
12:40H

SHARING SIGNATURE

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


Reporting Centre Person's Signature
Name:
NRIC/FIN No:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was parking at the Woodland Checkpoint, waiting for my passport clearance at the counter when this car (SSU 7370G) just bumped into me from behind. I felt an impact at a while in my car so I came out and saw that this car had hit my car from behind.

[Signature]

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

<input type="checkbox"/>	- Reporting Only
<input type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input checked="" type="checkbox"/>	- Claim OD/TP at other workshop

DECLARATION

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

[Signature]

Policyholder's signature

Date & Time 11/6/18

1240H

Driver's Signature

(If driver not the policyholder)

Date & Time

[Signature]

Reporting Centre Personnel's Signature

Name:

Nric/Fin No.



TRANS EUROKARS PTE LTD
NO:5 UBI CLOSE, SINGAPORE 408605
ESTIMATE COST OF REPAIRS

EUROKARS GROUP

not Affected
the photo before
2 dy.

MSIG INSURANCE SINGAPORE P/L 4 SHENTON WAY #21-01 SGX CENTRE 2 SINGAPORE 068807 ATTN.: MOTOR CLAIMS FAX:		NAME: Mr Lim Keow Teck ADDRESS: 677A Jurong West Street 64 #11-267 Singapore 641677 TEL: 91823327		WIP: 20191 EXCESS: DATE: 9-Jul-18	
VEH NO:	SLH2958P	DATE IN:		CONTACT PERSON:	Ronald 63957875
CHASSIS NO:	MM6DL2SAAGW186315	MILEAGE:		TYPE OF CLAIM:	THIRD PARTY CLAIM
MODEL:	MAZDA2	DATE REG.:	28-Oct-16	POLICY NO.:	
NATURE OF WORKS					
Parts Description					
NO	QTY			REVISED	PRICES
1	REAR BUMPER	1	MDB7A-50-221BBB	ps/de	\$ 909.00
2	STAY, REAR BUMPER	2	MDB7A-50-271	11	\$ 24.60
3	BRACKET CENTER	1	MKD53-50-251	11	\$ 5.10
4	FASTENER, REAR BUMPER	7	MB45A-56-146A	ru	\$ 19.60
5	GROMMET, REAR BUMPER	4	MBHN1-50-021A	ru	\$ 10.00
6	CLIP, REAR BUMPER	1	MGJ21-50-049	ru	\$ 3.20
7	GROMMET, REAR BUMPER	1	M9991-00-501	ru	\$ 2.80
8	TAPE PROTECTOR, SENSOR	3	MGS1D-50-EM1A	ru	\$ 24.30
9	GASKET LHS, TAILLAMP	1	MDB7A-51-163	ru	\$ 31.90
10	GASKET RHS, TAILLAMP	1	MDB7A-51-153	ru	\$ 31.90
TOTAL PARTS					\$ 1,062.40
LESS 10%					\$ 106.24
TOTAL PARTS COST					\$ 956.16
Labour Description					
1	MZ-BR-REAR01	TO REPLACE REAR BUMPER. REPAIR ALL AREAS AFFECTED BY THE ACCIDENT.			660 \$ 1,320.00
2	MZ-SP-SREAR1	TO RESPRAY REAR BUMPER.			630 \$ 1,260.00
3	MZ-BR-REVSER	TO TRANSFER REVERSE SENSORS.			200 \$ 660.00
4	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.			120 \$ 250.00
5	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.			150 \$ 350.00

6	MZ-BR-SUNDRI	SUNDRIES.	Net 30	NETT	\$ 100.00
				TOTAL LABOUR	\$ - \$ 3,940.00
				TOTAL PARTS	\$ - \$ 956.16
				TOTAL	\$ - \$ 4,896.16
				LESS EXCESS	\$ - \$ -
				TOTAL AFTER EXCESS	\$ -
				GST 7%	\$ - \$ -
				GRAND TOTAL	\$ - \$ -

REMARKS:
 THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD
 THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF
 REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING
 CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED
 WITH THE REPAIRS, A **QUOTATION FEE OF \$400** WILL BE APPLIED
 ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS
 PRICE AS WELL AS LABOUR CHARGES.

TRANS EUROKARS PTE LTD

 Authorised Signature

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:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Jun 2018		18 Jul 2018 16:01 Edit Adj Rpt	S\$2,719.43 Edit Estimates	S\$2,719.43 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	YEONG HWEE TOI , ID: S7630287A								
Main Claimant:	LIM KEOW TECK , ID: S7112970E								
Vehicle Reg. No.:	SLH2958P	Date of Loss:	10/06/2018 01:00 - :59 [19 Months and 13 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 564756	Policy/Cover Note No.:	28992904QMX (Comprehensive) Coverage: 22/07/2017 - 23/12/2018						
Vehicle Reg. No. (Insured):	SJU7370G	Policy No. (Claimant):							
		Excess:	S\$500.00						
Repairer:	Trans Eurokars Pte Ltd (HQ) 5 Ubi Close, 408605 Ubi - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Elaine Ngu Siau Mei - 6594 2540]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MARCUS CHUA] ... [Final Rpt due 17/08/2018]								
Adj Asg. Remarks:	LIABILITY UNCLEAR-OI NON REPORTING TP AGREE APPOINT LKK -MARCUS CHUA Please move the requested timing to 4PM tomorrow, 19 July FOR SURVEY CONTACT RONALD YAP FOR APPOINTMENT:63958899 / 91277928								
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

***SLH2958P (564756)**
[SJU7370G]
TP
LIM KEOW TECK
Jun 10 2018 1:00AM
[YEONG HWEE TOI]
Trans Eurokars 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	23/07/18 12:01	Adjuster Immediate Advice	Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	22/07/18 09:37	Chassis Number	Load JPG	<input checked="" type="checkbox"/>
2	22/07/18 09:38	Odometer Reading	Load JPG	<input checked="" type="checkbox"/>
3	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
4	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
5	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
6	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
7	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
8	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
9	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
10	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
11	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
12	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
13	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
14	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
15	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
16	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
17	22/07/18 09:38	General View	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	18/07/18 11:22	TPD - SLH2958P GIA REPORT & EST.pdf	Load PDF	
2	18/07/18 11:22	PRI - SLH2958P.pdf	Load PDF	
3	18/07/18 11:22	Email 10 SURYVORS to TPD - SLH2958P.pdf	Load PDF	
4	18/07/18 11:22	EMAIL TO APPOINT LKK -SLH2958P.pdf	Load PDF	

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; height: 40px; width: 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: CS/MSG18013110/UVD3E2

Date: 15/11/2018

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: 28992904QMX

Claimant Vehicle No : SLH2958P

Insured Vehicle No : SJU7370G

Date of Loss: 10/06/2018

Nature of Claim: TP

Claim No: 564756

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SLH2958P

Make & Model: MAZDA MAZDA5, 2.0 5-DOOR WAGON 2.0L SP.6EAT SUNR (A)

Engine No: P520344102

Reg. Date: 28/10/2016 (Man. Year: 2016)

Chassis No: MM6DL2SAAGW186315

Colour: White

Odometer: 55970 km

Engine Capacity: 1496 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: 185/60R16

Rear Tyre Size: 185/60R16

Front Left Side: Dunlop 6 mm

Rear Left Side: Dunlop 6 mm

Front Right Side: Dunlop 6 mm

Rear Right Side: Dunlop 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,056.16	959.43	96.73	9.16
Miscellaneous Items	0.00	0.00	0.00	
Labour	3,840.00	1,760.00	2,080.00	54.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	4,896.16	2,719.43	2,176.73	44.46
+ GST 7.00/7.00% (S\$)	342.73	190.36	152.37	44.46
Nett Amount (S\$)	5,238.89	2,909.79	2,329.10	44.46

INSPECTION

Date of Assignment: 18/07/2018

Date Inspected: 20/07/2018

Inspected At:

Trans Eurokars Pte Ltd (HQ)

5 Ubi Close

Singapore 408605

Estimated Period of Repair: 2.0 days

Adjuster: MARCUS CHUA

Manager: VERON CHEN

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.

THE VEHICLE HAS NOT SEND IN FOR REPAIR.

(REPAIR COST NOT CONCLUDE)

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 15 Nov 2018)
Parts:	M1-SUV	MAZDA MAZDA5 2.0 5-DOOR WAGON 2.0L SP.6EAT SUNR (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLH2958P)	
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		*REAR BUMPER	Dented/Deformed	909.00 FL	*909.00 FL
2	2		*STAY,REAR BUMPER	Not Necessary	24.60 FL	*- FL
3	1		*BRACKET CENTER	Not Necessary	5.10 FL	*- FL
4	7		*FASTENER,REAR BUMPER	Necessary	19.60 FL	*19.60 FL
5	4		*GROMMET,REAR BUMPER	Necessary	10.00 FL	*10.00 FL
6	1		*CLIP,REAR BUMPER	Necessary	3.20 FL	*3.20 FL
7	1		*GROMMET,REAR BUMPER	Necessary	2.80 FL	*2.80 FL
8	3		*TAPE PROTECTOR,SENSOR	Necessary	24.30 FL	*24.30 FL
9	1		*GASKET LHS,TAILLAMP	Necessary	31.90 FL	*31.90 FL
10	1		*GASKET RHS,TAILLAMP	Necessary	31.90 FL	*31.90 FL
11	1		*SUNDRIES	Necessary	100.00 FS	*30.00 FS

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

Sub Total (S\$)	1,162.40	1,062.70
- List Item Discount on L Items 10.00/10.00% (S\$)	106.24	103.27
Total Parts (S\$)	1,056.16	959.43

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	TO REPLACE REAR BUMPER,REPAIR ALL AREAS AFFECTED BY THE ACCIDENT	New	1,320.00	660.00
2	TO RESPRAY REAR BUMPER	New	1,260.00	630.00
3	TO TRANSFER REVERSE SENSOR	New	660.00	200.00
4	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING	New	250.00	120.00
5	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS	New	350.00	150.00
Gross Labour Cost (S\$)			3,840.00	1,760.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >