

7/20/2000

ASS. REC. BY:

REF: CS/CTI18013253/KH322

Special Instruction:

Survivor
Mentor

Kenneth

ASSIGNMENT (Office)

From (Person):

Elaine Cheong

of

CTI

Date/Time: 20/7/18 @ 1:15pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SBT 68504

Insured:

SGZ 6182

at Workshop m/s

Kian Teong Auto

Tel:

9178 6498

of

176 Bin Ming Drive # 01-08

Policy No:

DMPCSN1770511700

Claim No:

SNM18D03568C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 18/07/2018

23/07/2018 @ Morning

CA / REV / REP. / REV 24 HRS

lwp

H.O.D. Endorsement:

Date/Time:

4:05pm @ 20/7/18

Person Contacted:

Wendy

Vehicle ☒ IN ☐ OUT

Date/Time

Action/Instruction (✓) Estimate

SBT 68504-X

SGZ 6182-X

13/9 11pm @ 31001 email & call (Cred 4718.50; 58%)

(08/11/13) wef

REF: CFI

ASS. REC. BY:

ASSIGNMENT

From: Date: 23/07/18

Estimated Cost:

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

To Inspect Vehicle No: SBT 68504

at Workshop m/s Kian Teong Auto

of 176 Sin Ming Drive # 01-08

Insured:

Policy No.

Claims No.

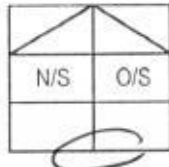
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value: 862K

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS ^{up}

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SBT 68504 Yr Regn: 10, 15

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

Truck / Trailer or

Make: Mazda 4, 2 c.c. 1496

Colour: M. Grey A/C: Insured / Std / NI / NA

Sp. Reading: 64677 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JM60 J2HAA0110050P

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/65R15

R: ————

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

TOYO / YOKO or

Front

R/Bal. 3 mm

L/Bal. 3 mm

D.O.A. 18/7/18

Rear

R/Bal. 3 mm

L/Bal. 3 mm

D.O.I. 23/7/18

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.

Date / Time Action / Instruction

24/7 File pass to Catherine

RECEIVED 1 SEP 2018

Date/Time, File Pass to?

☐ : Preli. Report

11/3/19 Typist

☒ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$) S + RS, SI☐ : Interview (\$) Photos☐ : Tech. Invs (\$) Others☐ : Weekend (\$)

Report Format: TP

Lump Sum / I.B.I: (\$ 3100)

Survey Fee:

220

Transportation:

Photos

Others

TOTAL

220

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

CLAIM SUBFOLDER TRACKING

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'd | Status |
|------|-------------|---------------|--|---------|---------------|------------|--|
| Main | 20 Jul 2018 | | 20 Jul 2018 13:15 Assign | | | | New Assignment Cancel Case |

| | | | | |
|------|-----------|---------------|-----------|--------------------------|
| Main | Reference | Claim Details | Documents | Show All |
|------|-----------|---------------|-----------|--------------------------|

CLAIM SUBFOLDER DETAILS [Created by insurer]

| | | | |
|-----------------------------|---|------------------------|----------------------------------|
| Insured: | LIONEL NG YONG GIAP, ID: S7334218Z | | |
| Main Claimant: | SEE BEOW TUAN, ID: S14177771 | | |
| Vehicle Reg. No.: | SBT6850U | Date of Loss: | 18/07/2018 22:00 - :59 |
| Claim Type: | TP / SNM18D03568C02 | Policy/Cover Note No.: | DMPCSN1770511700 (Comprehensive) |
| Vehicle Reg. No. (Insured): | SGZ618Z | Policy No. (Claimant): | 5084689953-01 |
| | | Excess: | \$50.00 |
| Repairer: | Kian Teong Auto Centre (HQ) BLK 176 SIN MING DRIVE #01-08 SIN MING AUTOCARE, 575721 Sin Ming - Tel: | | |
| Handling Insurer: | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong] | | |
| Claimant's Insurer: | NTUC Income Insurance Co-operative Ltd (HQ) - Tel: | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 31/07/2018] | | |
| Driver/Custodian (Insured): | LIONEL NG YONG GIAP (44 / Male), NRIC: S7334218Z | | |
| Adj Asg. Remarks: | NO EST, ASSIGN HENRY NG AS SJE. | | |

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. | | | | | | | | | |

Lucas Lee

From: info@ktauto.com.sg
Sent: Thursday, 19 July, 2018 5:11 PM
To: Claims Dept of CTI
Subject: RE: PRE-REPAIR SURVEY FOR VEHICLE NO: SBT6850U
Attachments: GIA 6850 -1.pdf; GIA 6850 -2.pdf

Dear Sirs,

Please find attached GIA for pre-repair arrangement, your insured vehicle SGZ 618 Z. Kindly please advice liability as direct settlement is our first priority, assuring you our best attention at all times.

Thank you
Yours faithfully
Wendy Siew
On and behalf of
Kian Teong Auto Centre
176 Sin Ming Drive
Sin Ming autocare #01-08
Singapore 575721
Tel: 65 64556268
Fax: 65 64555166
HP: 91786498
Website: www.ktauto.com.sg

This email has been scanned by the Symantec Email Security.cloud service.
For more information please visit <http://www.symanteccloud.com>



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 | | | |
|---|---|---------------------------|------------|
| CHINA TAIPING INSURANCE (S) PTE LTD | | Ref : CS/CTI18013253/Ktd3 | |
| 3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909 | | Date : 20-07-2018 | |
| | | Code : CTI | |
| 1. Policy Particulars :- THIRD PARTY CLAIM | | | |
| Insured Veh. | SGZ 618Z | Veh. Inspected | SBT 6850U |
| Policy No. | DMPCSN1770511700 | Coverage (\$) | 0.00 |
| Claim No. | SNM18D03568C02 | Excess (\$) | 0.00 |
| Assign From | MERIMEN (ELAINE CHEONG) | Assign Date | 20/07/2018 |
| 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 | 18/07/2018 | Inspection Date | 23/07/2018 |
| Survey held at | KIAN TEONG AUTO CENTRE BLK 176 SIN MING DRIVE #01-08 SIN MING CARE SINGAPORE 575721 | | |
| 5a. Remarks | | | |
| A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS. | | | |

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 | 19/07/2018 14:29 |
| Date Of Accident | 18/07/2018 22:45 |
| Exact Location Of Accident | ORCHARD ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SBT6850U |
| Insured/Policyholder | |
| Name Of Registered Owner | SEE BEOW TUAN |
| NRIC No | S1417777I |
| Email Address | SBTUAN@YAHOO.COM |
| Mobile Phone No | (LOCAL) +65-96919067 |
| Alternative Phone No | OFFICE-96919067 |

Vehicle Particulars

| | |
|--|-------------|
| Manufacturer | MAZDA |
| Model | 2 |
| 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 |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5084689953-01 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | SEE BEOW TUAN |
| NRIC No | S1417777I |
| Date Of Birth | 13/07/1960 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 02/05/1979 |
| Driving Experience | 39 YEARS AND 2 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-96919067 |
| Fax Number | |
| Contact Number | OFFICE-96919067 |
| Email Address | SBTUAN@YAHOO.COM |

| | |
|---|----------------------------------|
| Address | BLK 210 #02-351 BISHAN STREET 23 |
| Postcode | 570210 |
| 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 | 2 |
| 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 STATEMENT (ATTENDED BY: JAMES NG)

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 | SGZ618Z |
| Vehicle Make/Model/Colour | HONDA CIVIC |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | LIONEL NG |
| NRIC/Passport Number | S7334218Z |
| Contact Number | 98486545 |
| 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:

19 JUL 2018

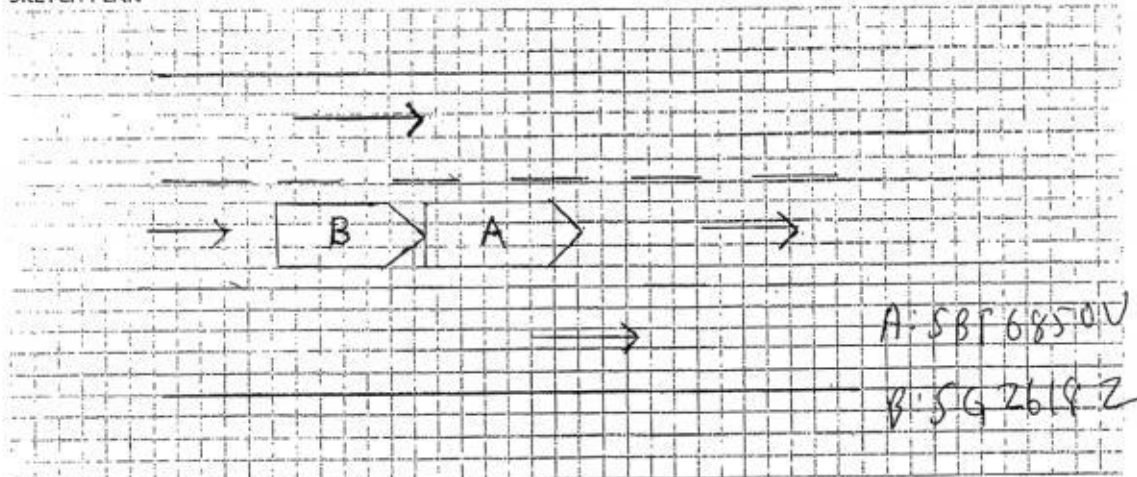
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

NG WING KIN JAMES
S7927881E

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the night of 18th July 2018 10.45 pm, along Orchard Road, just outside Mandarin Gallery Building, car SG2 618 Z (car B) hit onto the rear of my car SBT 6850 U (car A)

DECLARATION

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

Policyholder's Signature
Date & Time:

19 JUL 2018

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

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



NG WING KIN JAMES
S7927881E

KIAN TEONG AUTO CENTRE

Blk 176 Sin Ming Drive #01-08
 Sin Ming AutoCare Singapore 575721
 Tel No. : 64556268 Fax No. : 64555166
 E-Mail : info@ktauto.com.sg
 Website : www.ktauto.com.sg
 Tax Reg. No. : 52991859E Buss. Reg. No. : 52991859E

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
 3 ANSON ROAD
 #16-00 SPRINGLEAF TOWER, SINGAPORE 079909

Attention : Motor Claim Department
 Contact : 6389 6111 Fax No. : 6222 1033 / 62253592

Estimate : ES000451

Date : 19/07/2018
 Vehicle Num. : 0
 Make/Model :
 Chassis/Eng# :
 Accident Date : 19/07/2018
 Claim No. :
 Reference : SBT6850U MAZDA 2
 Policy No. :

S/N Quantity Particular Unit Price Amount S\$

- LIST ITEMS :
1. 1 REAR BUMPER *850.80*
 2. 1 REAR BUMPER REINFORCEMENT
 3. 1 SET REAR BUMPER BRACKET
 4. N REVERSE SENSOR
 5. 1 SET REAR BUMPER CLIPS
 6. 1 REAR BOOTH LID *911.10*
 7. 1 REAR END PANEL *380.50*
 8. 1 REAR SPARE TYRE COMPARTMENT
 9. N REAR WINDSCREEN SEALANT

List Total S\$:

- NETT ITEMS :
1. 2 REAR NUMBER PLATE LIGHT BULB
 2. 1 SET REAR NUMBER PLATE WITH CASING

Nett Total S\$:

LABOUR :
 LABOUR FEES:
 PROVISION OF LABOUR TOOLS AND CONSUMABLES
 TO KNOCK AND REPAIR ALL DAMAGED PARTS
 TO REMOVE AND CHANGE ALL DAMAGED PARTS
 TO SPRAY PAINT ALL DAMAGED PARTS
 TO REMOVE AND RE-FIT EXHAUST PIPE UNIT
 TO FACILATE REPAIR
 TO REMOVE AND REFIT REAR WINDSCREEN O FACILATE REPAIR
 TO CHECK AND REPAIR TAIL LAMP WIRING
 TO CHECK AND REPAIR REVERSE SENSOR WIRING

Labour Total S\$:

Not Authorised
11 Bay 83100k
Repair After Paint
4 days

Short 2011N

| | | |
|----------|----------|---|
| <i>R</i> | 978.50 | ✓ |
| <i>R</i> | 665.00 | X |
| <i>R</i> | 58.00 | X |
| <i>M</i> | 220.00 | |
| <i>M</i> | 58.00 | ✓ |
| <i>R</i> | 1,227.50 | |
| <i>R</i> | 688.00 | ✓ |
| <i>K</i> | 890.00 | X |
| <i>M</i> | 30.00 | ✓ |
| <hr/> | | |
| 4,815.00 | | |

5.00

| | | |
|------------|-------|--------------|
| <i>CRS</i> | 10.00 | ✓ |
| <i>Red</i> | 58.00 | <i>95.00</i> |
| <hr/> | | |
| 68.00 | | |

8001

| | |
|--------------------|----------|
| 1,250.00 | |
| <i>7201</i> | |
| <i>nn</i> | 780.00 |
| | 140.00 X |
| <hr/> | |
| 150.00 <i>120k</i> | |
| 120.00 <i>20k</i> | |
| <hr/> | |
| 2,440.00 | |

E. & O.E.

Total S\$: 7,323.00

for KIAN TEONG AUTO CENTRE

Please do not hesitate to contact us at the above number if there is any other further quire.
 We thank you for your kind attention. Your prompt reply is greatly appreciated.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before 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:

7518 SD

KIAN TEONG AUTO CENTRE

Blk 176 Sin Ming Drive #01-08
Sin Ming AutoCare Singapore 575721
Tel No. : 64556268 Fax No. : 64555166
E-Mail : info@ktauto.com.sg
Website : www.ktauto.com.sg
Tax Reg. No. : 52991859E Buss. Reg. No. : 52991859E

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD Supplementary Estimate : ES000452
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER, SINGAPORE 079909

Attention : Motor Claim Department
Contact : 6389 6111 Fax No. : 6222 1033 / 62253592

Date : 24/07/2018
Vehicle Num. : 0
Make/Model :
Chassis/Eng# :
Accident Date : 24/07/2018
Claim No. :
Reference : SBT6850U MAZDA 2
Policy No. :

| S/N | Quantity | Particular | Unit Price | Amount S\$ |
|-----|----------|------------|------------|------------|
|-----|----------|------------|------------|------------|

| | | | | |
|----|---|---------|--|--|
| 1. | 1 | LOGO | | |
| 2. | 1 | MAZDA | | |
| 3. | 1 | SKYACTV | | |
| 4. | 1 | | | |

LIST ITEMS :
REAR BOOTH LID EMBLEM
REAR BOOTH LID EMBLEM
REAR BOOTH LID EMBLEM
REAR BOOTH LID CAMERA COVER

List TotalS\$:

| | |
|--------|---|
| 49.50 | ✓ |
| 48.50 | ✓ |
| 39.50 | ✓ |
| 58.00 | ✓ |
| 195.50 | |

208

E. & O.E.

Total S\$: 195.50
=====

for KIAN TEONG AUTO CENTRE

Please do not hesitate to contact us at the above number if there is any other further quire.
We thank you for your kind attention. Your prompt reply is greatly appreciated.

KIAN TEONG AUTO CENTRE

Blk 176 Sin Ming Drive #01-08
 Sin Ming AutoCare Singapore 575721
 Tel No. : 64556268 Fax No. : 64555166
 E-Mail : info@ktauto.com.sg
 Website : www.ktauto.com.sg
 Tax Reg. No. : 52991859E Buss. Reg. No. : 52991859E

surveyor's copy

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
 3 ANSON ROAD
 #16-00 SPRINGLEAF TOWER, SINGAPORE 079909

Attention : Motor Claim Department

Contact : 6389 6111 Fax No. : 6222 1033 / 62253592

Estimate : ES000451

Date : 19/07/2018

Vehicle Num. : 0

Make/Model :

Chassis/Eng# :

Accident Date : 19/07/2018

Claim No. :

Reference : SBT6850U MAZDA 2

Policy No. :

S/N Quantity Particular Unit Price Amount S\$

| | | | | |
|-----|-------|------------------------------|--|--------|
| 1. | 1 | REAR BUMPER | | |
| 2. | 1 | REAR BUMPER REINFORCEMENT | | |
| 3. | 1 SET | REAR BUMPER BRACKET | | 220.00 |
| 4. | N | REVERSE SENSOR | | |
| 5. | 1 SET | REAR BUMPER CLIPS | | |
| 6. | 2 | REAR NUMBER PLATE LIGHT BULB | | |
| 7. | 1 | REVERSE CAMERA | | |
| 8. | 1 | REAR BOOTH LID | | |
| 9. | 1 | REAR END PANEL | | |
| 10. | 1 | REAR SPARE TYRE COMPARTMENT | | |
| 11. | N | REAR WINDSCREEN SEALANT | | |

LIST ITEMS :

REAR BUMPER
 REAR BUMPER REINFORCEMENT
 REAR BUMPER BRACKET
 REVERSE SENSOR
 REAR BUMPER CLIPS
 REAR NUMBER PLATE LIGHT BULB
 REVERSE CAMERA
 REAR BOOTH LID
 REAR END PANEL
 REAR SPARE TYRE COMPARTMENT
 REAR WINDSCREEN SEALANT

List Total S\$:

NETT ITEMS :

1. 1 SET REAR NUMBER PLATE WITH CASING

Nett Total S\$:

LABOUR :

LABOUR FEES:

PROVISION OF LABOUR TOOLS AND CONSUMABLES
 TO KNOCK AND REPAIR ALL DAMAGED PARTS
 TO REMOVE AND CHANGE ALL DAMAGED PARTS
 TO SPRAY PAINT ALL DAMAGED PARTS
 TO REMOVE AND RE-FIT EXHAUST PIPE UNIT
 TO FACILATE REPAIR
 TO REMOVE AND REFIT REAR WINDSCREEN O FACILATE REPAIR
 TO CHECK AND REPAIR TAIL LAMP WIRING

30.00

250.00

58.00

1,250.00

780.00

140.00

150.00

120.00

CONTINUE / ...

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 items must be approved by surveyor
- is subject to final approval from insurance company

Acknowledged by Repairer:

Signature:

Date:

KIAN TEONG AUTO CENTRE

Blk 176 Sin Ming Drive #01-08
 Sin Ming AutoCare Singapore 575721
 Tel No. : 64556268 Fax No. : 64555166
 E-Mail : info@ktauto.com.sg
 Website : www.ktauto.com.sg
 Tax Reg. No. : 52991859E Buss. Reg. No. : 52991859E

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
 3 ANSON ROAD
 #16-00 SPRINGLEAF TOWER, SINGAPORE 079909

Attention : Motor Claim Department
 Contact : 6389 6111 Fax No. : 6222 1033 / 62253592

Estimate : ES000451

Date : 19/07/2018
 Vehicle Num. : 0
 Make/Model :
 Chassis/Eng# :
 Accident Date : 19/07/2018
 Claim No. :
 Reference : SBT6850U MAZDA 2
 Policy No. :

| S/N | Quantity | Particular | Unit Price | Amount S\$ |
|-----|----------|---|------------|------------|
| | | TO CHECK AND REPAIR REVERSE SENSOR WIRING | | |
| | | Labour Total S\$: | | 2,440.00 |

E. & O.E.

Total S\$: 2,748.00
 =====

for KIAN TEONG AUTO CENTRE

Please do not hesitate to contact us at the above number if there is any other further quire.
 We thank you for your kind attention. Your prompt reply is greatly appreciated.

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

| CLAIM SUBFOLDER TRACKING | | | | | | | Status |
|--------------------------|-------------|---------------|--|--|--|------------|---|
| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'd | |
| Main | 20 Jul 2018 | | 20 Jul 2018 13:15 Edit Adj Rpt | S\$3,100.00 Edit Estimates | S\$3,100.00 View Rpt | | Pending for Survey Report Cancel Case |

| Main | Reference | Claim Details | Documents | Show All | | | | | |
|---|---|------------------------|--|----------|---------|-------------|--------------|------------|-------|
| CLAIM SUBFOLDER DETAILS [Created by insurer] | | | | | | | | | |
| Insured: | LIONEL NG YONG GIAP, ID: S7334218Z | | | | | | | | |
| Main Claimant: | SEE BEOW TUAN, ID: S1417777I | | | | | | | | |
| Vehicle Reg. No.: | SBT6850U | Date of Loss: | 18/07/2018 22:00 - :59 [32 Months and 29 Days From LTA Reg Date (Man Yr)] | | | | | | |
| Claim Type: | TP / SNM18D03568C02 | Policy/Cover Note No.: | DMPCSN1770511700 (Comprehensive) | | | | | | |
| Vehicle Reg. No. (Insured): | SGZ618Z | Policy No. (Claimant): | 5084689953-01 | | | | | | |
| | | Excess: | S\$0.00 | | | | | | |
| Repairer: | Kian Teong Auto Centre (HQ) BLK 176 SIN MING DRIVE #01-08 SIN MING AUTOCARE, 575721 Sin Ming - Tel: | | | | | | | | |
| Handling Insurer: | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong] | | | | | | | | |
| Claimant's Insurer: | NTUC Income Insurance Co-operative Ltd (HQ) - Tel: | | | | | | | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 31/07/2018] | | | | | | | | |
| Driver/Custodian (Insured): | LIONEL NG YONG GIAP (44 / Male), NRIC: S7334218Z | | | | | | | | |
| Adj Asg. Remarks: | NO EST, ASSIGN HENRY NG AS SJE. | | | | | | | | |
| 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

***SBT6850U (SNM18D03568C02)**
[SGZ618Z]

TP

SEE BEOW TUAN

Jul 18 2018 10:00PM

[LIONEL NG YONG GIAP]

Kian Teong Auto Centre

[Upload Documents](#) | [Upload Photos](#) | [Compose New Letter](#)

View [View in Browser](#)

| Assessment Reports | | | 1 per page | <input checked="" type="checkbox"/> |
|--------------------|----------------|--------------------|------------|-------------------------------------|
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:40 | Accident Statement | Load HTM | |

| Photos/Images | | | 3 per page | <input checked="" type="checkbox"/> |
|---------------|----------------|--|------------|-------------------------------------|
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 19/07/18 14:36 | Accident Photo [Linked Accident Report Documents] | Load JPG | <input checked="" type="checkbox"/> |

| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail | Print |
|----|-----------------|-----------------------------------|-----------|-------------------------------------|
| 1 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 7 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 8 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 9 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 10 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 11 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 12 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 13 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 14 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 15 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 16 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 17 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 18 | 13/09/18 15:13 | General View | Load JPG | <input checked="" type="checkbox"/> |
| 19 | 13/09/18 15:16 | Reinspection Photo | Load JPG | <input checked="" type="checkbox"/> |
| 20 | 13/09/18 15:16 | Reinspection Photo | Load JPG | <input checked="" type="checkbox"/> |
| 21 | 13/09/18 15:16 | Reinspection Photo | Load JPG | <input checked="" type="checkbox"/> |
| 22 | 13/09/18 15:16 | Reinspection Photo | Load JPG | <input checked="" type="checkbox"/> |

| Documentation | | | 1 per page | <input checked="" type="checkbox"/> |
|---------------|--------------|--|------------|-------------------------------------|
| No | Finalized On | China Taiping Insurance (Singapore) Pte. Ltd. (HQ) | Thumbnail | Print |

| Assessment Reports | | | 1 per page | <input checked="" type="checkbox"/> |
|--------------------|----------------|--|------------|-------------------------------------|
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 20/07/18 13:14 | PRS | Load PDF | |
| 2 | 20/07/18 13:15 | OI GIA | Load PDF | |
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:39 | Sketch Plan [Linked Accident Report Documents] | Load TIF | |
| 2 | 19/07/18 14:39 | Sketch Plan #2 [Linked Accident Report Documents] | Load TIF | |

Linked Accident Report Documents

| Assessment Reports | | | 1 per page | <input checked="" type="checkbox"/> |
|--------------------|----------------|--------------------|------------|-------------------------------------|
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:40 | Accident Statement | Load HTM | |
| Photos/Images | | | 3 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| 2 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| 3 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| 4 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| 5 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| 6 | 19/07/18 14:36 | Accident Photo | Load JPG | <input checked="" type="checkbox"/> |
| Documentation | | | 1 per page | <input checked="" type="checkbox"/> |
| No | Finalized On | VAC (Sin Ming) | Thumbnail | Print |
| 1 | 19/07/18 14:39 | Sketch Plan | Load TIF | |
| 2 | 19/07/18 14:39 | Sketch Plan #2 | Load TIF | |

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; margin-top: 5px;"></div> | | | | |
| Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small> | | | | |

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/CT118013253/KTD3E2

Date: 14/09/2018

REFERENCE

Handling Insurer: China Taiping Insurance
(Singapore) Pte. Ltd.

Policy No: DMPCSN1770511700

Claimant Vehicle
No: SBT6850UInsured Vehicle
No: SGZ618Z

Date of Loss: 18/07/2018

Nature of Claim: TP

Claim
No: SNM18D03568C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SBT6850U

Make & Model: MAZDA 2, 1.5 (A)

Engine No: P520318389

Reg. Date: 19/10/2015 (Man. Year: 2015)

Chassis No: JM6DJ2HAA01100509

Colour: Metallic Grey

Odometer: 64677 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: 185/65R15

Rear Tyre Size: 185/65R15

Front Left Side: Dunlop 3 mm

Rear Left Side: Dunlop 3 mm

Front Right Side: Dunlop 3 mm

Rear Right Side: Dunlop 3 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS | Repairer's | Adjuster's | Difference | Diff % |
|--|-----------------|-----------------|-----------------|--------------|
| Parts | 5,078.50 | 2,195.72 | 2,882.78 | 56.76 |
| Miscellaneous Items | 0.00 | 0.00 | 0.00 | |
| Labour | 2,440.00 | 1,660.00 | 780.00 | 31.97 |
| Paintwork Labour | 0.00 | 0.00 | 0.00 | |
| Towing | 0.00 | 0.00 | 0.00 | |
| Calculated Gross Total (S\$) | 7,518.50 | 3,855.72 | 3,662.78 | 48.72 |
| Approved Total (Overridden) (S\$) | | 3,100.00 | | |
| (S\$) | 7,518.50 | 3,100.00 | 4,418.50 | 58.77 |
| + GST 7.00/7.00% (S\$) | 526.30 | 217.00 | 309.30 | 58.77 |
| Nett Amount (S\$) | 8,044.80 | 3,317.00 | 4,727.80 | 58.77 |

INSPECTION

Date of Assignment: 20/07/2018

Date Inspected: 23/07/2018 Inspected At:

Kian Teong Auto Centre (HQ)
BLK 176 SIN MING DRIVE #01-08 SIN
MING AUTOCARE
Singapore 575721

Estimated Period of Repair: 4.0 days

Adjuster: KENNETH KONG**Manager:** DENISE TAY KWEE CHENG

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: 14 Sep 2018) |
| Parts: | 143 | MAZDA 2 1.5 (A) (Catalogue:Merimen Singapore 1.0) |
| Labour: | Repairer's | (Price-denominated Standard List) |
| Print Code: | (Unsubmitted, no print-code for SBT6850U) | |
| 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 | Bent | 978.50 F | *850.80 FL |
| 2 | 1 | | *REAR BUMPER REINFORCEMENT | Repair | 665.00 F | *- FL |
| 3 | 1 | | *SET REAR BUMPER BRACKET | Repair | 58.00 F | *- FL |
| 4 | 1 | | *SET REAR BUMPER CLIPS | Necessary | 58.00 F | *58.00 FL |
| 5 | 1 | | *REAR BOOTH LID | Bent | 1,227.50 F | *911.10 FL |
| 6 | 1 | | *REAR END PANEL | Bent | 688.00 F | *380.50 FL |
| 7 | 1 | | *REAR SPARE TYRE COMPARTMENT | Repair | 890.00 F | *- FL |
| 8 | 1 | | *REVERSE SENSOR | Shorted | 220.00 FS | *200.00 FS |
| 9 | 1 | | *REAR WINDSCREEN SEALANT | Necessary | 30.00 F | *30.00 FL |
| 10 | 2 | | *REAR NUMBER PLATE LIGHT BULB | Cracked | 10.00 FS | *10.00 FS |
| 11 | 1 | | *SET REAR NUMBER PLATE WITH CASING | Dented | 58.00 FS | *45.00 FS |
| 12 | 1 | | *REAR BOOTH LID EMBLEM LOGO | Necessary | 49.50 F | *49.50 FL |
| 13 | 1 | | *REAR BOOTH LID EMBLEM MAZDA | Necessary | 48.50 F | *48.50 FL |
| 14 | 1 | | *REAR BOOTH LID EMBLEM SKYACTV | Necessary | 39.50 F | *39.50 FL |
| 15 | 1 | | *REAR BOOTH LID CAMERA COVER | Missing | 58.00 F | *58.00 FL |
| | | | | | Sub Total (\$\$) | 5,078.50 2,680.90 |
| | | | | | - List Item Discount on L Items 0.00/20.00% (\$\$) | 0.00 485.18 |
| | | | | | Total Parts (\$\$) | 5,078.50 2,195.72 |

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 | PROVISION OF LABOUR TOOLS AND CONSUMABLES.TO KNOCK AND REPAIR ALL DAMAGED PARTS.TO REMOVE AND CHANGE ALL DAMAGED PARTS | New | 1,250.00 | 800.00 |
| 2 | TO SPRAY PAINT ALL DAMAGED PARTS | New | 780.00 | 720.00 |
| 3 | TO REMOVE AND RE-FIT EXHAUST PIPE UNIT TO FACILITATE REPAIR | New | 140.00 | - |
| 4 | TO REMOVE AND REFIT REAR WINDSCREEN TO FACILATE REPAIR | New | 150.00 | 120.00 |
| 5 | TO CHECK AND REPAIR TAIL LAMP WIRING.TO CHECK AND REPAIR REVERSE SENSOR WIRING | New | 120.00 | 20.00 |
| Gross Labour Cost (S\$) | | | 2,440.00 | 1,660.00 |

Report was unsubmitted during this print-out.

< END OF ESTIMATES >