

22/03/2002

ASS. REC. BY:

REF: CS/ III 18014228 / KFD302

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Gabriel Wee

of III

Date/Time: 6/8/18 @ 9:31am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SJV 351C

Insured:

at Workshop m/s Loh Hung Automotive Repair

Tel: 90111432

of Blk 176, # 03-08 Sin Ming Autocare

Policy No: 18mpc0012082

Claim No: MC2082657

Sum Insured:

Excess: TBA \$1000

Make of Veh:

(Client's Record)

D.O.A. 26/07/2018

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 9:44am @ 6/8/18

Person Contacted: Danny

Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SJV 351C - CC3/AIG 11010090/A1jr/q2 DOA: 26/5/2011
6/8	Refer WA menmen
7/8	Authorise by melnadi
7/8	inform Danny authorise repair excess \$1000
	U/L @ 33000000 (Red: 3741.70 : 53%)

ASSIGNMENT

From: _____ Date: 6/8/2018

Estimated Cost: _____

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

To Inspect Vehicle No: SJV 351C

at Workshop m/s LOH Heng Automotive

of B1K176 Sin Ming Autocare #03-08

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: TBA

(Client's Record)

Make of Veh: Dunlop @ 90 111 432

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: 817K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 04 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SJV 351C Yr Regn: 01, 10

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

Truck / Trailer or Wagon

Make: Hyundai i30 c.c. 1591

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

Sp. Reading: 83380 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMITDC 81DMAUC 63422

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/65R15

R: _____

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

TOYO / YOKO or

Front 8 mm Rear 8 mm

R/Bal. 8 mm L/Bal. 8 mm

L/Bal. 8 mm D.O.A. 261718 D.O.I. 618118

Survey held at

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

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

Date / Time	Action / Instruction
<u>7/8</u>	<u>File pass to MWP</u>
RECEIVED 03 OCT 2018	

Date/Time, File Pass to? : Preli. Report

1) 310 Typist : Final Report

Date/Time, File Return to?

2) _____

Report Format : OD

Lump Sum / I.B.I. (\$ 3300)

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee: 250

Transportation: _____

S + RS, SI _____

Photos _____

Others 10

TOTAL

260



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Affiliated to Federation Internationale Des Experts En Automobile			
INDIA INTERNATIONAL INSURANCE PL		Ref : CS/III18014228/Ktd3	
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711		Date : 06-08-2018	
		Code : III2	
1. Policy Particulars :- OWN DAMAGE			
Insured Veh.		Veh. Inspected	SJV 351C
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	GABRIEL WEE	Assign Date	06/08/2018
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	26/07/2018	Inspection Date	06/08/2018
Survey held at	LOH HENG BLK 176 #03-08 SIN MING DRIVE SINGAPORE 575721		
5a. Remarks			
A) THE MARKET VALUE IS S\$----- (EST. AVERAGE) B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE AUTHORISED REPAIRS.			

Nivitha (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Monday, 6 August 2018 9:31 AM
To: lohheng0308@yahoo.com.sg; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)
Cc: C Meenachi - III
Subject: RE: RE: 1st party claim SJV351C
Attachments: CCI08032018_0002.pdf; CCI08032018_0001.pdf

Dear Sir/Mdm,

Please conduct an OD survey on our vehicle SJV351C and let us have your report urgently.

This claim will be handled by Meena.

*Kindly create OD claim & upload this survey request email to merimen.

Thank You.

Best Regards,

Gabriel Wee

Motor Claims Dept.

India International Insurance Pte Ltd

64 Cecil Street | #05 IOB Building | Singapore 049711

Tel: 6347 6100, Ext - 248

From: Danny Loh [mailto:loh heng0308@yahoo.com.sg]

Sent: 06 August, 2018 9:19 AM

To: Motor Claim - III <motorclaim@iii.com.sg>

Subject: RE: RE: 1st party claim SJV351C

Thanks for the reply, Gabriel,
We prefer LKK auto for the survey.

Sent from Yahoo Mail on Android

On Mon, 6 Aug 2018 at 9:08, Motor Claim - III
<motorclaim@iii.com.sg> wrote:

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

DISCLAIMER:

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

It may contain confidential and/or legally privileged information.

If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

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India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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India International Insurance Pte Ltd.

Registration No. 198703792-K

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5445F
Vehicle Details	
Vehicle No.:	SJV351C
Vehicle to be Exported:	No
Intended De-registration Date:	06 Aug 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	FD I30 CW 1.6 A
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	G4FC9U767991
Chassis No.:	KMHDC81DMAU063422
Maximum Power Output:	89.7 kW (120 bhp)
Open Market Value:	\$14,570.00
Original Registration Date:	08 Jan 2010
First Registration Date:	08 Jan 2010
Transfer Count:	1
Actual ARF Paid:	\$14,570.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Jan 2020
PARF Rebate Amount:	\$8,013.00
Intended COE Rebate Details	
COE Expiry Date:	07 Jan 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$18,150.00
COE Rebate Amount:	\$2,576.00
Total Rebate Amount:	\$10,589.00

The information contained herein is correct as at 06 Aug 2018

OK

View Received Message

This mail is associated with :

***SJV351C (MC20182657)**
OD
Jul 26 2018 1:00PM
[TEO HUI CHU JOYCE]
Loh Heng

Reply Reply All Mark as Unread Print Message Delete Message Forward

From India International Insurance Pte Ltd (HQ) (III_SG), sent on 07/08/2018 10:54 AM.
To LKK_HQ
Subject Alert - Adj Mandate Approved (S\$5436.08) - SJV351C - Claim Handler: C. Meenachi

Approved:5436.08:EXCESS \$600.00

DOCUMENTS SUMMARY

There are no documents.

Note: This document has not been finalised.**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: India International Insurance Pte Ltd
64 Cecil Street
#04-00 IOB Building
Singapore 049711From: LKK Auto Consultants Pte Ltd
51 Ubi Ave 1 #01-25
Paya Ubi Industrial Park
Singapore 408933

Attn:

Date: 06 Aug 2018

Preliminary Advice

Vehicle No	: SJV351C	Accident Date	: 26/07/2018
Make	: HYUNDAI I30 CW	Policy No.	: 18MPC00012082
Assignment Date	: 06/08/2018	Excess	: S\$0.00
Date of Inspection	: 06/08/2018	Est. Duration of Repair	: 4.00
Inspection At	: LOH HENG (HQ) 176 SIN MING DRIVE, #03-08 SIN MING AUTO CARE SINGAPORE 575721		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	7,041.70
Revised Amount	:S\$	2,567.44
Check Items (Estimated)	:S\$	2,868.64
Total	:S\$	5,436.08
Lump Sum Repair	:S\$	

Total Loss Consideration

New for Old Value	:S\$	
Pre-Accident Value	:S\$	17,000.00
COE / PARF Rebate	:S\$	10,589.00
Salvage Value	:S\$	
Margin for Repair	:S\$	6,411.00

Remarks

- (x) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- () Other comments :

LOH HENG

Automotive Repair & Services
Accident & Insurance Claims

Date 02-08-18

To : India International Insurance
Claims Department

Re : Policy No. 18MPC00012082
Vehicle No. SJU 351C

From: M/s Loh Heng

Sub : 1st Party Claim

This is to inform you that vehicle no. SJU 351C, which is insured under your company was involved in an accident on 26-07-18.

Repairs are being taken at M/s Loh Heng.

Attached herewith is an estimate quote and motor accident report for your perusal.

Thank you for your assistance.

Yours faithfully,
LOH HENG

Danny Loh
HP : 90111432



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: 5665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MFA118097522 / Vehicle Registration No: SJV 351C
 Name (as shown in NRIC) : TEO HUI CHU JOYCE NRIC/FIN/Passport No : S1725445F
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore()
 Contact (Tel) : _____ Mobile No. : 96741434
 Email Address : _____
 Date of Accident : 26/07/2018 Time of Accident : 13:05
 Place of Accident : REPUBLIC POLY CAR PARK
 Insurance Company: INDIA INTERNATIONAL INSURANCE PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

1) TO AMEND 'REPORTING' TO 'OWN DAMAGE' CLAIM

Joyce

Policyholder / Driver's Signature
 Date:



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

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	28/07/2018 13:00
Date Of Accident	26/07/2018 13:05
Exact Location Of Accident	REPUBLIC POLY CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV351C
Insured/Policyholder	
Name Of Registered Owner	TEO HUI CHU JOYCE
NRIC No	S1725445F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96741434
Alternative Phone No	OTHERS-NOPHONE

Vehicle Particulars

Manufacturer	HYUNDAI
Model	FD I30 CW 1.6 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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18MPC00012082
Cover Note Number	

Driver

Name of Driver	TEO HUI CHU JOYCE
NRIC No	S1725445F
Date Of Birth	06/10/1965
Occupation	INDOOR
Date Of Driving Pass	26/10/1985
Driving Experience	32 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96741434
Fax Number	
Contact Number	OTHERS-NOPHONE
Email Address	NOEMAIL

Address 4 CHESTNUT CLOSE
 Postcode 679446
 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 COLLIDED INTO PARKED VEHICLE
 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?
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO 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 SLI 1048B
 Vehicle Make/Model/Colour
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver
 NRIC/Passport Number
 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 willful 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 lodging 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 investigation(s) 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 (a) 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.

Signature
 Policyholder's Signature
 Date & Time:

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

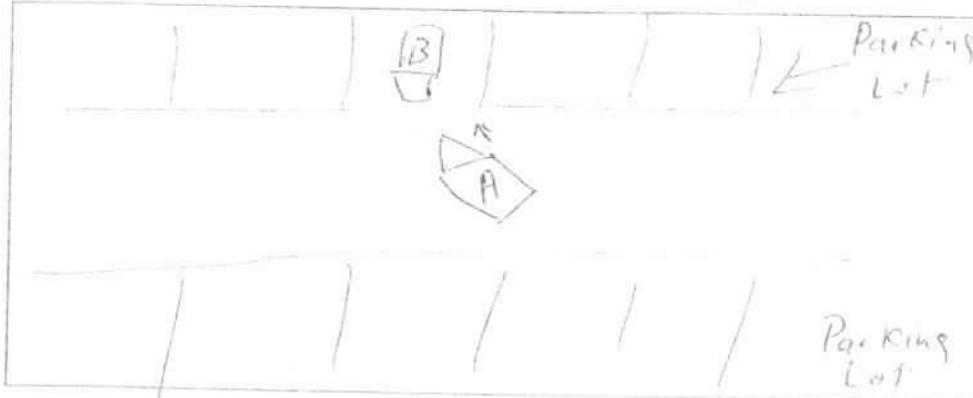


Reporting Centre Personnel's Signature
 Name:
 NRIC/PIN No.:

Sketch Plan Pg. 2

Date of accident: 26 July 2018 Time: 10:50pm Location: Republic Republic Poly C/P
Veh A: SJV 357C Veh B: SLL 1048B No of pax: 1 Weather: Clear (Dry) Rain/Wet

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was reversing my car into the parking lot when the car ^{is parked by} jerked forward and hit the car which was parked at the opposite lot.

Claim OD/TP at Falcon-Air Claim OD/TP at other workshop Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop: M/S LOK HENG

Email address:

& myself: 26761434

Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Jeyaraj
Policyholder's Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time



Reporting Centre/Agent's Signature

Name:

NRIC/ID No:

LOH HENG

Automotive Repair Services
Accident Insurance Claims

8-Feb-18

India International INSURANCE PTE LTD

Attn : Motor Claim Department

Re : Estimated Quotation

Vehicle No. : SJV351C

NOT AUTHORIZED
11 Day @ 3300h
Respray After Paint

RM
[Signature]

4 days

Fax: 62584315

S/N	Description	Amount (S\$)
A PART REPLACEMENT		
	Front bumper	\$ 643.30
	Front bonnet	\$ 1,774.10
	Headlamp right	\$ 686.30
	headlamp left	\$ 686.30
	Bumper reinforcement	\$ 324.60
	Front support panel	\$ 876.90
	Bumper retainer right	\$ 29.70
	Bumper sponge	\$ 121.40
	Fog lamp left	\$ 186.70
	Fog lamp right	\$ 186.70
	Bumper grille	\$ 87.20
	Bonnet lock	\$ 86.30
	Wiper tank	\$ 90.20
		\$ 5,779.70
	Less : 10% 20%	\$ 5,201.70
	Sub-Total	
B LABOUR CHARGES		
1	To remove and replace damaged parts, knocking and restraightening of inner panel, realignment and readjustment	\$ 880.00
2	To remove and replace air-con condenser, refill air-con gas	\$ 160.00
3	To respray + putty on damaged parts	\$ 800.00
4		
	Sub-total	
	GRAND TOTAL OF A & B	\$ 7,041.70

✓
✓
✓
X
✓
X
✓
X
✓
X
✓
X
✓

300
X
300

Block 176 #03-08 Sin Ming Autocare
Sin Ming Drive
Singapore 575721
Tel : 64532237 / 64530797
Fax : 64556384

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	06 Aug 2018 Edit Reg		06 Aug 2018 00:00 Edit Adj Rpt	S\$3,300.00 Edit Estimates	S\$3,300.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS		[Created by adjuster]							
Insured:	TEO HUI CHU JOYCE , ID: S1725445F								
Vehicle Reg. No.:	SJV351C	Date of Loss:	26/07/2018 13:00 - :59 [102 Months and 18 Days From LTA Reg Date (Man Yr)]						
Claim Type:	OD / MC20182657	Policy/Cover Note No.:	18MPC00012082 (Comprehensive)						
		Excess:	S\$600.00						
Repairer:	Loh Heng (HQ) 176 Sin Ming Drive, #03-08 Sin Ming Auto Care, 575721 Sin Ming - Tel: 64532237								
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by C. Meenachi - 6347 6073]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 16/08/2018]								
ASSOCIATED MAIL RECEIVED		View All Compose Case Mail							
<ul style="list-style-type: none"> III_SG (20/09/2018): Alert - Adj Mandate Approved (S\$0.00) - SJV351C - Claim Handler: C. Meenachi III_SG (07/08/2018): Alert - Adj Mandate Approved (S\$5436.08) - SJV351C - Claim Handler: C. Meenachi 									
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

*SVJ351C (MC20182657)
OD
Jul 26 2018 1:00PM
[TEO HUI CHU JOYCE]
Loh Heng

Upload Documents Upload Photos Compose New Letter			View View in Browser <input type="button" value="v"/>	
Assessment Reports			1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>	
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	06/08/18 13:46	Adjuster Immediate Advice	Load HTM	<input type="checkbox"/>
Photos/Images			3 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
2	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
3	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
4	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
5	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
6	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
7	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
8	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
9	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
10	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
11	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
12	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
13	03/10/18 09:59	General View	Load JPG	<input checked="" type="checkbox"/>
14	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
15	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
16	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
17	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
18	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
19	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
20	03/10/18 10:14	Reinspection Photo	Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page <input type="button" value="v"/> <input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	06/08/18 14:06	estimate	Load PDF	<input type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	07/08/18 08:52	Singapore Accident Statement	Load PDF	<input type="checkbox"/>

Documents Checklist

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

Show Remarks To: Handling Insurer

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

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

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

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

India International Insurance Pte Ltd
64 Cecil Street, #04-00 IOB Building
Singapore 049711

Our File No: CS/III18014228/KTD3E2

Date: 26/10/2018

REFERENCE

Insured/Claimant: TEO HUI CHU JOYCE Policy No: 18MPC00012082
Date of Loss: 26/07/2018 Nature of Claim: OD Claim No: MC20182657

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SJV351C**
Make & Model: HYUNDAI I30 CW, 1.6 GLS (FD) (A) Engine No: G4FC9U767991
Reg. Date: 08/01/2010 (Man. Year: 2009) Chassis No: KMHDC81DMAU063422
Colour: Metallic Silver Odometer: 83380 km
Engine Capacity: 1591 cc
Market Value/New Car Price: S\$17,000.00
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: Yes

CONDITION OF TYRES

Front Tyre Size: 185/65 R15 Rear Tyre Size: 185/65 R15
Front Left Side: Michelin 8 mm Rear Left Side: Michelin 8 mm
Front Right Side: Michelin 8 mm Rear Right Side: Michelin 8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	5,201.73	3,154.80	2,046.93	39.35
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,840.00	1,040.00	800.00	43.48
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,041.73	4,194.80	2,846.93	40.43
Approved Total (Overridden) (S\$)		3,300.00		
- Excess (S\$)	600.00	600.00	0.00	0.00
(S\$)	6,441.73	2,700.00	3,741.73	58.09
+ GST 7.00/7.00% (S\$)	450.92	189.00	261.92	58.09
Nett Amount (S\$)	6,892.65	2,889.00	4,003.65	58.09

INSPECTION

Date of Assignment: 06/08/2018
Date Inspected: 06/08/2018 Inspected At: Loh Heng (HQ)
176 Sin Ming Drive, #03-08 Sin Ming Auto Care
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:	(Last Synchronised: 25 Oct 2018)	
Parts:	N/A	HYUNDAI I30 CW 1.6 GLS (FD) (A) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SJV351C)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER	Buckled	643.30 FL	*643.30 FL
2	1		*FRONT BONNET	Bent	1,774.10 FL	*1,774.10 FL
3	1		*HEADLAMP RIGHT	Mtg Cracked	686.30 FL	*686.30 FL
4	1		*HEADLAMP LEFT	Serviceable	686.30 FL	*- FL
5	1		*BUMPER REINFORCEMENT	Bent	324.60 FL	*324.60 FL
6	1		*FRONT SUPPORT PANEL	Repair	876.90 FL	*- FL
7	1		*BUMPER RETAINER RIGHT	Distorted	29.70 FL	*29.70 FL
8	1		*BUMPER SPONGE	Cracked	121.40 FL	*121.40 FL
9	1		*FOG LAMP LEFT	Serviceable	186.70 FL	*- FL
10	1		*FOG LAMP RIGHT	Mtg Cracked	186.70 FL	*186.70 FL
11	1		*BUMPER GRILLE	Dented	87.20 FL	*87.20 FL
12	1		*BONNET LOCK	Repair	86.30 FL	*- FL
13	1		*WIPER TANK	Dented	90.20 FL	*90.20 FL
Sub Total (S\$)					5,779.70	3,943.50
- List Item Discount on L Items 10.00/20.00% (S\$)					577.97	788.70
Total Parts (S\$)					5,201.73	3,154.80

F=Franchise part. 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
Labour Items				
1	TO REMOVE AND REPLACE DAMAGED PARTS, KNOCKING AND RESTRAIGHTENING OF INNER PANEL, REALIGNMENT AND READJUSTMENT.	New	880.00	500.00
2	TO REMOVE AND REPLACE AIR-CON CONDENSER, REFILL AIR-CON GAS.	New	160.00	0.00
3	TO RESPRAY + PUTTY ON DAMAGED PARTS.	New	800.00	540.00
Gross Labour Cost (S\$)			1,840.00	1,040.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >