

ASS. REC. BY:

REF: 05/MSG18014464/ KHD3

Special Instruction:

Surveyor:  
Menmen

Kalvin

ASSIGNMENT (Office)

From (Person):

Chbia Nyuk Pui

of

MSG

Date/Time:

8/8/18 @ 4:55pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHA 2461P

Insured:

FBK 186SH

at Workshop m/s:

Comfort Delgro

Tel:

6214 8300

of

59 Loyang Drive

Policy No:

MSD / VMS / 18-381522

Claim No:

MSC / V / 18-001063

Sum Insured:

Excess:

Make of Veh:

D.O.A.

06/08/2018

(Client's Record)

10/8/2018

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

6:15pm @ 8/8/18

Person Contacted:

Fauzy

Vehicle

IN OUT

Date/Time	Action/Instruction (✓) Estimate
	SHA 2461P - NSI INC 17019767 / M17be2 DOA: 12/10/17
	FBK 186SH
BB-	Revert via menmen preli advise.



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

CLAIM SUBFOLDER TRACKING						
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd
Main	08 Aug 2018		08 Aug 2018 16:55 Assign			
						<b>New Assignment</b> <a href="#">Cancel Case</a>

<a href="#">Main</a>	<a href="#">Reference</a>	<a href="#">Claim Details</a>	<a href="#">Documents</a>	<a href="#">Show All</a>
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**CLAIM SUBFOLDER DETAILS** [Created by insurer]

Insured:	CHAR KOCK CHONG, ID: S2743584Z		
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R		
Vehicle Reg. No.:	SHA2461P	Date of Loss:	06/08/2018 11:00 - :59 [75 Months and 7 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / MSC/V/18-001063	Policy/Cover Note No.:	MSD/VMS/18-381522 Coverage: 15/04/2018 - 14/04/2019
Vehicle Reg. No. (Insured):	FBK1865H	Policy No. (Claimant):	
		Excess:	
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pul - 6594 2521]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 09/08/2018]		
Adj Asg. Remarks:	on WP. SURVEY DISAGREE ON SJE - ASSIGN LKK OI NOT REPORTED CONTACT: FAUZY 6214 8319/ 8125 9176		

**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.									

open ref. for



## 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/MSG18014464/K1td3

16 RAFFLES QUAY

#24-01 HONG LEONG BLDG SINGAPORE 048581

Date : 08-08-2018

Code : MSG



### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBK 1865H	Veh. Inspected	SHA 2461P
Policy No.	MSD/VMS/18-381522	Coverage (\$)	0.00
Claim No.	MSC/V/18-001063	Excess (\$)	0.00
Assign From	MERIMEN (CHHIA NYUK PUI)	Assign Date	08/08/2018

### 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

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### 5. General Information

Accident Date	06/08/2018	Inspection Date	10/08/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

### 5a. Remarks

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

**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: Chhia Nyuk Pui

Date: 13 Aug 2018

**Preliminary Advice**

Insured Vehicle No	: FBK1865H	Accident Date	: 06/08/2018
TP Vehicle No	: SHA2461P	Assignment Date	: 08/08/2018
Make	: HYUNDAI SONATA NF	Est. Duration of Repair	: 2.00
Date of Inspection	: 10/08/2018		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

**Point of Impact / General Description of Damages**

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

Repairer's Estimate (Gross)	:S\$	2,681.92
Revised Amount	:S\$	1,038.32
Check Items (Estimated)	:S\$	617.20
Total	:S\$	1,655.52

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.

Team: KH ARC Repair TP(CLS0)1

JOB CARD

Sales Order: 3846106

JC NO.: 305197255

CUSTOMER

RMS COMFORT TRANSPORTATION PTE LTD  
CUSTOMER NO. 7010045  
ADDRESS 383 SIN MING DRIVE  
Singapore SINGAPORE 575717  
L. (R) 65508755 (O)  
(P)

SCOUNT CARD NO.

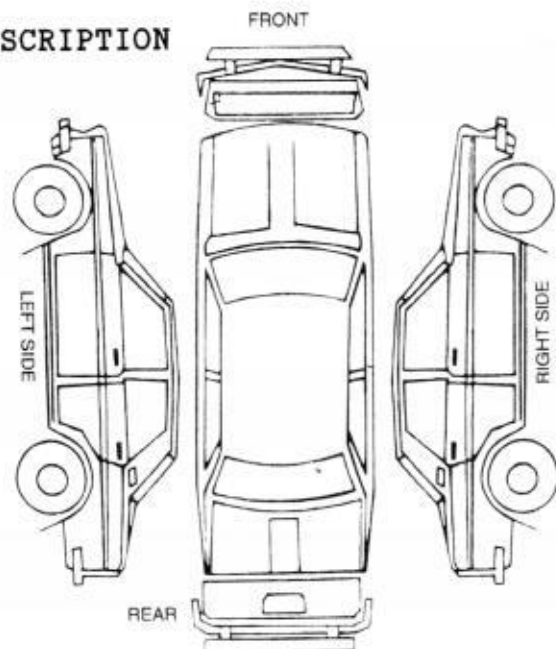
REGN NO.: <b>SHA2461P</b>	MILEAGE
MAKE : <b>HYUNDAI</b>	FUEL E.....1/2.....F
MODEL <b>SONATA</b>	DATE/TIME IN <b>07.08.2018 11:00</b>
YR OF MANU. <b>30.04.2012</b>	TARGET DATE
CHASSIS CODE <b>KMHET41VMCA824482</b>	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 06.08.2018  
NATURE: 3P 06.08.18/C

S/NO LABOR CODE

DESCRIPTION



CHECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Vehicle No.:  
SHA2461P FZ MSIG

Exit Pass

Vehicle No.:  
SHA2461P

Name of Service Advisor

Signature/Date

Name of Service Advisor

Date

Vehicle returned to Service Reception upon collection

To be kept by Security Guard

## 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	07/08/2018 14:11
Date Of Accident	06/08/2018 11:00
Exact Location Of Accident	TAMPINES AVE 10 X AVE 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA2461P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA
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	TAXI

### Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

### Driver

Name of Driver	SUKRI BIN MOHAMAD
NRIC No	S00184201
Date Of Birth	18/09/1954
Occupation	OUTDOOR
Date Of Driving Pass	10/11/1980
Driving Experience	37 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90100291
Fax Number	
Contact Number	
Email Address	NOEMAIL



Address	BLK 158 HOUGANG STREET 11 #03-01
Postcode	530158
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	PAYA LEBAR NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO POLICE REPORT : T/20180806/2191

#### 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	FBK1865H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Nature Of Damage	RIGHT REAR



No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	UNKNOWN
Approximate Age	
Injuries Sustain	RIGHT LEG BLEEDING AND SHOULDER PAIN
Injured person in which vehicle?	FBK1865H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

## Sketch Plan Pg. 1

### 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.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199203321R

Policyholder's Signature  
Date & Time:

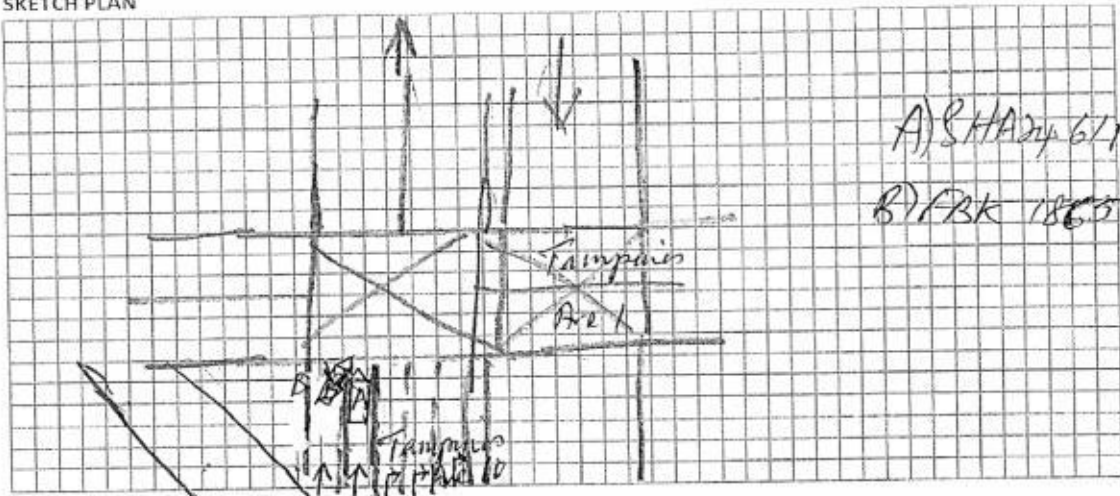
*Sum*

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

*[Signature]*  
SRM  
CSP

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report T/20180806/2191

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 192203321R

Policyholder's Signature  
Date & Time:

Sukri

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

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

## Sketch Plan Pg. 3



**SINGAPORE  
POLICE FORCE**



T/20180806/2191

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

1 of 3

Report No. T/20180806/2191

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 06/08/2018 22:06	Vide Report No.: G/20180806/0192	Station Diary No.: 41
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**Informant's Particulars**

Name of Informant: SUKRI BIN MOHAMAD			Address: APT BLK 158 HOUGANG STREET 11 #03-01 SINGAPORE 530158	
ID Type / ID No.: NRIC NO / S00184201			Contact No.: Home/Office: Mobile: 90100291	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 63	Date of Birth: 18/09/1954	Type of Informant: Driver	
Race: Boyanese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/08/2018 18:20	Type of Location: Straight Road
Location: Junction of Road 1 and Road 2 TAMPINES AVENUE 10 TAMPINES AVENUE 1 Junction				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK1865H	Motorcycle				Slightly Damaged	0
SHA2461P	Car				Slightly Damaged	1



**SINGAPORE  
POLICE FORCE**



T/20180806/2191

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

2 of 3

Report No. T/20180806/2191

**CONTINUATION OF REPORT**

**Brief Details.**

On 06/08/2018 at about 1820hrs, I was driving my car vehicle number SHA2461P along Tampines Avenue 10 approaching Tampines Avenue 1 and that was a motorbike vehicle number suddenly came from my left and tried to made a right turn in front of my car, I was taken surprise by the motorbike and couldn't stop in time. The motorcyclist collided into my car's front bumper and fall due to the collision.

After the collision, I immediately came down from my vehicle to make a check on him. One of the passer-by called for ambulance service and the motorcyclist was conveyed by the ambulance. Traffic police then arrived at scene and I was given the case card, Incident number: G/20180806/0192 and I was asked to lodge a traffic accident report.

I was not injured and my car front bumper suffered slight damages.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999



T/20180806/2191

3 of 3

Report No. T/20180806/2191

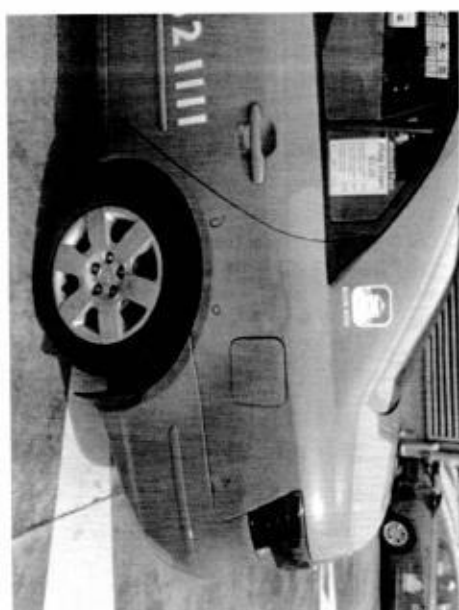
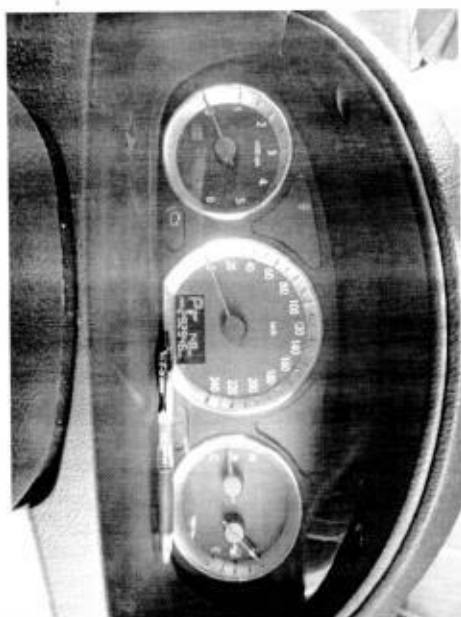
## CONTINUATION OF REPORT

Sketch Plan

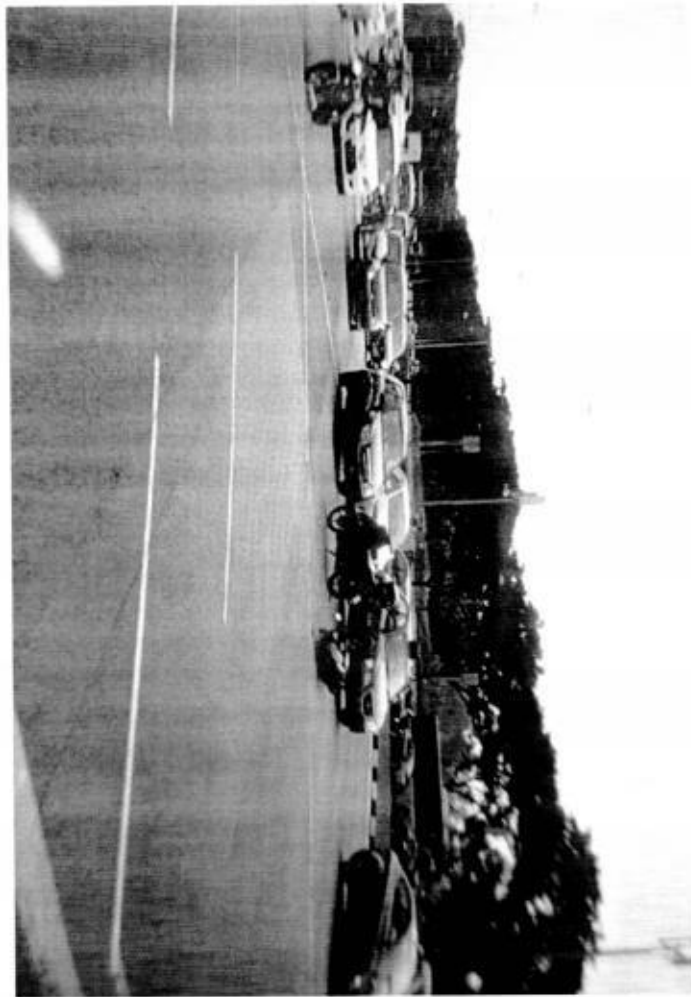
Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 KOH PEI QI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 06/08/2018 22:06
Officer In Charge Of Case: TP / GIT / Staff Sgt MOHAMMAD ZULKARNIAN BIN SAMSUDIN Contact No: 65476429	Classification Of Case:
Authentication Stamp NP168  Singapore Police Force	







REPAIR ESTIMATE\*

VEHICLE NO : SHA 2461P

DATE 7/8/2018 16:05

MAKE :

MODEL : HYUNDAI SONATA

MSIG

FRONT LEFT

Fz

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Radiator Grille X <sup>sc</sup>			\$ 282.10
	Radiator Grille U Moulding X <sup>sc</sup>			\$ 108.90
	Front Bumper Cover + <sup>sc</sup>			\$ 538.80
	Front Bumper Sponge X <sup>sc</sup>			\$ 136.30
	Front Bumper Reinforcement X <sup>sc</sup>			\$ 504.10
	Front Bumper Centre Grille X <sup>sc</sup>			\$ 131.10
	Front Bumper Bracket Top (LH/RH) X <sup>sc</sup>	\$	22.40	\$ 44.80
	Front Bumper Protector (LH/RH) X <sup>sc</sup>	\$	29.20	\$ 58.40
	Headlamp (LH) / <sup>sc</sup>			\$ 797.90
	<b>SUB TOTAL</b>			<b>\$ 2,602.40</b>
	<b>LESS 20%</b>			<b>\$ 520.48</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,081.92</b>
	Front Number plate / <sup>sc</sup>			\$25
	<b>Labour Charge</b>			200
	Panel Beating			\$ <del>350.00</del>
	Spray Painting Charge			\$ <del>250.00</del> 250
	<b>TOTAL LABOUR</b>			<b>\$ 600.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 2,681.92</b>
Kahr 16/11/18 10/8/18 1000L. 2/1/18 4/5 After Repair photo				<div> <p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> <li>• To resurvey before/after spray painting</li> <li>• To display damaged parts during resurvey</li> <li>• Parts prices are subject to confirmation</li> <li>• Third party claims must be on "Without Prejudice" basis</li> <li>• No illegal motor repairs allowed</li> <li>• Supplementary claims must be resurveyed and is subject to final approval from Insurance Company</li> </ul> <p>Acknowledged by Repairer</p> <p>Signature: _____</p> <p>Date: _____</p> </div>
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

# COMFORTDELGRO ENGINEERING

Our Job Ref No : 305197255  
Date : 14.08.2018

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHA2461P

Date of Accident : 06.08.2018

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

1. The repair job shall bill to: MSIG -- FBK1865H
2. The finalized amount shall be:
  - (a) Spare Parts after List discount \$0.00
  - (b) Labour Charges \$0.00
  - Total for Part-By-Part Repair Cost \$0.00
  - (c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20% \$850.00  
Final Lumpsum Repair cost \$850.00

3. Estimated normal period for repairs: 2 working days.

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

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : Kabin

Date : 15/8/18

## For Official Use Only

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

Remarks:

## 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/MSG18014464/K1TD3N2

Date: 20/08/2018

## REFERENCE

Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd.	Policy No:	MSD/VMS/18-381522	
Claimant Vehicle No :	SHA2461P	Insured Vehicle No :	FBK1865H	
Date of Loss:	06/08/2018	Nature of Claim:	TP	Claim No: MSC/V/18-001063

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	SHA2461P		
Make & Model:	HYUNDAI SONATA NF, 2.0 CRDI AT ABS 2WD 4DR TURBO (A)	Engine No:	D4EA9764310
Reg. Date:	30/04/2012 (Man. Year: 2012)	Chassis No:	KMHET41VMCA824482
Colour:	Blue	Odometer:	292946 km
Engine Capacity:	1991 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	Market Value/New Car Price		

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

## CONDITION OF TYRES

Front Tyre Size:	215/60R16	Rear Tyre Size:	215/60R16
Front Left Side:	Hankook 7 mm	Rear Left Side:	Hankook 7 mm
Front Right Side:	Hankook 7 mm	Rear Right Side:	Hankook 7 mm

The above values represent the remaining tyre treads depth

## COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	2,106.92	663.32	1,443.60	68.52
Miscellaneous Items	0.00	0.00	0.00	
Labour	600.00	400.00	200.00	33.33
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (\$\$)</b>	<b>2,706.92</b>	<b>1,063.32</b>	<b>1,643.60</b>	<b>60.72</b>
<b>Approved Total (Overridden) (\$\$)</b>		<b>850.00</b>		
<b>(\$\$)</b>	<b>2,706.92</b>	<b>850.00</b>	<b>1,856.92</b>	<b>68.60</b>
<b>+ GST 7.00/7.00% (\$\$)</b>	<b>189.48</b>	<b>59.50</b>	<b>129.98</b>	<b>68.60</b>
<b>Nett Amount (\$\$)</b>	<b>2,896.40</b>	<b>909.50</b>	<b>1,986.90</b>	<b>68.60</b>

## INSPECTION

Date of Assignment:	08/08/2018	
Date Inspected:	10/08/2018	Inspected At: ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: KALVIN ANG WEI KUN

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

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 20 Aug 2018)
<b>Parts:</b>	143	HYUNDAI SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHA2461P)	
<b>Validity:</b>	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	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*RADIATOR GRILLE	Serviceable	282.10 FL	*- FL
2	1		*RADIATOR GRILLE U MOULDING	Serviceable	108.90 FL	*- FL
3	1		*FRONT BUMPER COVER	Repair	538.80 FL	*- FL
4	1		*FRONT BUMPER SPONGE	Serviceable	136.30 FL	*- FL
5	1		*FRONT BUMPER REINFOCEMENT	Serviceable	504.10 FL	*- FL
6	1		*FRONT BUMPER CENTRE GRILLE	Serviceable	131.10 FL	*- FL
7	2		*FRONT BUMPER BRACKET TOP (LH/RH)	Serviceable	44.80 FL	*- FL
8	2		*FRONT BUMPER PROTECTOR (LH/RH)	Serviceable	58.40 FL	*- FL
9	1		*HEADLAMP (LH)	Grazed	797.90 FL	*797.90 FL
10	1		*FRONT NUMBER PLATE	Cracked	25.00 FS	*25.00 FS

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

<b>Sub Total (\$\$)</b>	<b>2,627.40</b>	<b>822.90</b>
<b>- List Item Discount on L Items 20.00/20.00% (\$\$)</b>	<b>520.48</b>	<b>159.58</b>
<b>Total Parts (\$\$)</b>	<b>2,106.92</b>	<b>663.32</b>

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
<b>Labour Items</b>				
1	PANEL BEATING	New	350.00	200.00
2	SPRAY PAINTING CHARGE	New	250.00	200.00
Gross Labour Cost (S\$)			<b>600.00</b>	<b>400.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >