

11/09/2003

A/S, REC, BY:

REF:

CS3/MSG18014702/T124d3

Special Instruction:

Survivor:  
Mummen

Tau Hieh

ASSIGNMENT (Office)

From (Person):

Christine Wong

of

MSIG

Date/Time: 13/8/18 @ 4:07pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJR 6367P

Insured:

8KS 3547P

at Workshop n/s:

H.S. Automotive

Tel:

6538 1368

of

Blk 2 Kaki Blk Ave 2 #01-15

Policy No:

28719908AVW

Claim No:

566721

Sum Insured:

Excess:

Make of Vch:

(Client's Record)

D.O.A. 06/08/2018

CA / REV / REP. / REV 24 HRS

1up

H.O.D. Endorsement:

Date/Time:

9:18am @ 14/8/18

Person Contacted:

Mr. Alex

Vehicle IN OUT

Date/Time	Action/Instruction ( + ) Estimate
	SJR 6367P - NA/FCI18014309/K1 DOA: 6/8/18
	8KS 3547P - NA/FCI18014309/K1 DOA: 6/8/18
	Dismantle: 15/8/2018
	After repair: 20/8/2018

INSURANCE

Tanpin

REF:

WS16.

ASSIGNMENT

CoE 219 July

From: Date:

Estimated Cost:

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

To inspect Vehicle No.

at Workshop m/s

of

Insured

Policy No.

Claims No.

Sum Insured

Excess

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value.

IDAC Accident Rpt: Consistent?: Yes or No

GIA / PR Seen: Consistent?: Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

-PRS-

Vehicle: IN / OUT

Date: Person Contacted

Veh No: SJR 6367P Yr Regn: 2009 July

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

Truck / Trailer or

Make: Mercedes Benz 11170 cc 1699

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

Sp Reading: 133766448 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WDP 16903225740020

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/ SJR/1 R: " "

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

TOYO / YOKO or

Front R/Bal: 6 mm Rear R/Bal: 6 mm

L/Bal: 6 mm L/Bal: 6 mm

D.O.A. D.O.I. 14/8/18 @ 4pm

Survey held at: H.S. Automotive.

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

O/S Rear

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

Date / Time Action / Instruction

Estimated repair range \$2,500 - \$3,300.

Range and No. of days

30/8/2018

30/8/18 Submit PRS Report

Date/Time: File Pass to?

☐: Preli. Report

☐: Final Report

1)

Date/Time: File Return to?

2)

Days Of Repair:

Resurvey No. of Trip: 2

Survey Fee:

Transportation

1) \$ \* PRS \* SI

2) Others

3) Others

Report Format: PRS-

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

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Insp (\$

☐ Weekend (\$

TOTAL



## 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 : CS3/MSG18014702/T1z4d3	
16 RAFFLES QUAY #24-01 HONG LEONG BLDG SINGAPORE 048581		Date : 14-08-2018	
		Code : MSG	
<b>1. Policy Particulars :- (THIRD PARTY CLAIM)</b>			
Insured Veh.	SKS 3547P	Veh. Inspected	SJR 6367P
Policy No.	28719908AVW	Coverage (\$)	0.00
Claim No.	566721	Excess (\$)	0.00
Assign From	MERIMEN (CHRISTINA WONG)	Assign Date	14/08/2018
<b>2. Vehicle Particulars &amp; Condition</b>			
Make & Model	c.c 0		
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
<b>3. Conditions of Tyres</b>			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
<b>4. Description of Damages</b>			
<b>5. General Information</b>			
Accident Date	06/08/2018	Inspection Date	14/08/2018
Survey held at	H S AUTOMOTIVE SERVICES 2 KAKI BUKIT AVE 2 #01-15 KAKI BUKIT AUTOHUB SINGAPORE 417921		
<b>5a. Remarks</b>			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	07 Aug 2018		13 Aug 2018 16:07 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	CHAN BAK THIAM, ID: S1746259H		
Main Claimant:	ROBINSON CAR RENTAL PTE LTD, Co. Reg. No.: -		
Vehicle Reg. No.:	SJR6367P	Date of Loss:	06/08/2018 16:00 - :59 [109 Months and 4 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 566721	Policy/Cover Note No.:	28719908AVW (Comprehensive) Coverage: 09/04/2018 - 08/04/2019
Vehicle Reg. No. (Insured):	SKS3547P	Policy No. (Claimant):	
		Excess:	S\$1,500.00
Repairer:	H S Automotive Services (Kaki Bukit) BLK 2 KAKI BUKIT, AVENUE 2, # 01-15, KAKI BUKIT AUTOHUB, 417921 Kaki Bukit - Tel: 67472755		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 14/08/2018]		
Adj Asg. Remarks:	Liability 100%. TP disagree with our SJE. Proceed to appoint LKK Auto Consultants. Contact Person: Mr Alex / 6538 1368.		

### 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.									

## 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	06/08/2018 17:43
Date Of Accident	06/08/2018 16:00
Exact Location Of Accident	WOODLANDS CHECKPOINT /QUENE FOR IMMGRATION COUNTER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR6367P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Co Reg No	- 202414041W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96168801
Alternative Phone No	OFFICE-96168801

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	D-18090229MFZH/2
Cover Note Number	

### Driver

Name of Driver	FONG YVONNE ( FANG YVONNE )
NRIC No	S7823523C
Date Of Birth	20/08/1978
Occupation	OUTDOOR
Date Of Driving Pass	02/04/1997
Driving Experience	21 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96168801
Fax Number	
Contact Number	OTHERS-96168801
Email Address	NOEMAIL

Address	BLK 206 TOA PAYOH NORTH #06-1203
Postcode	310206
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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

PLS REFER TO THE ATTACHED STATEMENT.

#### 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	SKS3547P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN BAK THIAM
NRIC/Passport Number	S1746259H
Contact Number	97348259
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

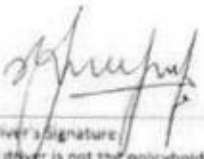
## Sketch Plan

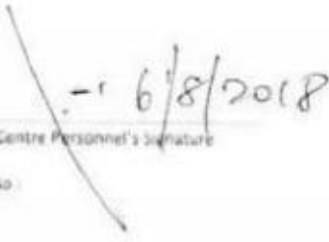
### SKETCH PLAN

#### 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:

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

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

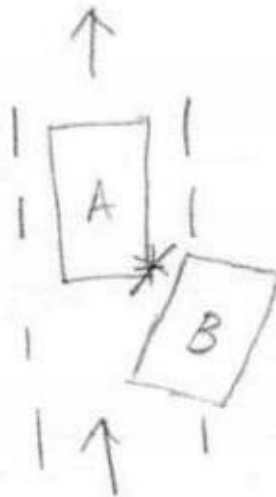


### Sketch Plan #2

### SKETCH PLAN

WOODLANDS  
CHECKPOINT

QUENE FOR  
IMMIGRATION  
COUNTER



A - SJR6367P  
B - SKS3547P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- VEHICLE A WAS SATIONARY AT WOODLANDS CHECKPOINT COUNTER QUEUE
- VEHICLE B HIT VEHICLE A FROM BEHIND
- DAMAGE TO VEHICLE A WAS AT REAR RIGHT BUMPER MARKED \*

## DECLARATION

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



Polycytridien  
Cyte & Tamer

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

Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/Pass No: \_\_\_\_\_

✓ :- 6/8/2018



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	4041W
Vehicle Details	
Vehicle No.:	SJR6367P
Vehicle to be Exported:	No
Intended De-registration Date:	21 Aug 2018
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	A170
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	26694030650962
Chassis No.:	WDD1690322J740020
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$25,115.00
Original Registration Date:	02 Jul 2009
First Registration Date:	02 Jul 2009
Transfer Count:	1
Actual ARF Paid:	\$25,115.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Jul 2019
PARF Rebate Amount:	\$12,557.00
Intended COE Rebate Details	
COE Expiry Date:	01 Jul 2019
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$14,840.00
COE Rebate Amount:	\$1,277.00
<b>Total Rebate Amount:</b>	<b>\$13,834.00</b>

The information contained herein is correct as at 21 Aug 2018

OK

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	07 Aug 2018		13 Aug 2018 16:07 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	CHAN BAK THIAM, ID: S1746259H		
Main Claimant:	ROBINSON CAR RENTAL PTE LTD, Co. Reg. No.: -		
Vehicle Reg. No.:	SJR6367P	Date of Loss:	06/08/2018 16:00 - :59 [109 Months and 4 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 566721	Policy/Cover Note No.:	28719908AVW (Comprehensive) Coverage: 09/04/2018 - 08/04/2019
Vehicle Reg. No. (Insured):	SKS3547P	Policy No. (Claimant):	
		Excess:	S\$1,500.00
Repairer:	H S Automotive Services (Kaki Bukit) BLK 2 KAKI BUKIT, AVENUE 2, # 01-15, KAKI BUKIT AUTOHUB, 417921 Kaki Bukit - Tel: 67472755		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Imm.Advice due 14/08/2018]		
Adj Asg. Remarks:	Liability 100%. TP disagree with our SJE. Proceed to appoint LKK Auto Consultants. Contact Person: Mr Alex / 6538 1368.		

### 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

**\*SJR6367P (566721)**  
**[SKS3547P]**  
**TP**  
**ROBINSON CAR RENTAL PTE LTD**  
**Aug 6 2018 4:00PM**  
**[CHAN BAK THIAM]**  
**H S Automotive Services**

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

**View**
[View in Browser](#)

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	08/08/18 14:24	<b>Accident Statement</b> From:DD - Reg. No: SKS3547P, Claimant: CHAN BAK THIAM	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
2	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
3	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
4	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
5	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
6	16/08/18 16:13	General View	 Load JPG	<input checked="" type="checkbox"/>
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17	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
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29	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
30	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>
31	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports			1 per page ▼	✓
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
32	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
33	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
34	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
35	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
36	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
37	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
38	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
39	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
40	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
41	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
42	21/08/18 12:02	Photographs of Damaged Parts	 Load JPG	✓
43	21/08/18 12:03	Photo After Spray	 Load JPG	✓
44	21/08/18 12:03	Photo After Spray	 Load JPG	✓
45	21/08/18 12:03	Photo After Spray	 Load JPG	✓
46	21/08/18 12:03	Photo After Spray	 Load JPG	✓
47	21/08/18 12:03	Photo After Spray	 Load JPG	✓
48	21/08/18 12:03	Photo After Spray	 Load JPG	✓
49	21/08/18 12:03	Photo After Spray	 Load JPG	✓
50	21/08/18 12:03	Photo After Spray	 Load JPG	✓
51	21/08/18 12:03	Photo After Spray	 Load JPG	✓
52	21/08/18 12:03	Photo After Spray	 Load JPG	✓
53	21/08/18 12:03	Photo After Spray	 Load JPG	✓
54	21/08/18 12:03	Photo After Spray	 Load JPG	✓
Documentation			1 per page ▼	✓
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	08/08/18 11:22	PRI	 Load PDF	
2	08/08/18 14:24	TP GIA REPORT From:OD - Reg. No: SKS3547P, Claimant: CHAN BAK THIAM	 Load PDF	

## Documents Checklist

### DOCUMENTS CHECKLIST

Reset

Save

Print

There are no document checklists configured.

### Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)

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)

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Singapore 408933

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS3/MSG18014702/T1Z4D3S2

Date: 03/09/2018

## REFERENCE

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

Policy No: 28719908AVW

Claimant Vehicle No : SJR6367P

Insured Vehicle No : SKS3547P

Date of Loss: 06/08/2018

Nature of Claim: TP

Claim No: 566721

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SJR6367P

Make &amp; Model: MERCEDES-BENZ A170, 1.7 (A)

Engine No: 26694030650962

Reg. Date: 02/07/2009 (Man. Year: 2009)

Chassis No: WDD1690322J740020

Colour: Silver

Odometer: 66448 km

Engine Capacity: 1699 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:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	

## CONDITION OF TYRES

Front Tyre Size: 195/55R16

Rear Tyre Size: 195/55R16

Front Left Side: Yokohama 6 mm

Rear Left Side: Yokohama 6 mm

Front Right Side: Yokohama 6 mm

Rear Right Side: Yokohama 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Nett Amount (S\$)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	

## INSPECTION

Date of Assignment: 13/08/2018

Date Inspected: 14/08/2018 Inspected At:

H S Automotive Services (Kaki Bukit)  
BLK 2 KAKI BUKIT, AVENUE 2, # 01-15, KAKI BUKIT  
AUTOHUB  
Singapore 417921

Estimated Period of Repair: 0.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: Janice Lee Si Hua

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.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.  
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,500.00 - \$3,300.00



## REPAIR DETAILS

### Reference

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 03 Sep 2018)
<b>Parts:</b>	144	MERCEDES-BENZ A170 1.7 (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SJR6367P)	
<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

There are no new parts selected.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.
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< END OF ESTIMATES >