

ASS. REC. BY:

REF:

CS/III18014718/Tisbe2

Special Instruction:

Surveyor

Taufik.

ASSIGNMENT (Office)

Mofmen.

From (Person):

Gabriel Wee

of

III

Date/Time: 13082018 1:43pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SFX 915M

Insured:

SHD 7132R

at Workshop m/s

HS Automotive

Tel:

6747 2755

of

2 Kaki Bukit Ave 2 #D1-15

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A.

08082018

(Client's Record)

CA / REV / REP. / REV 24 HRS Wp

H.O.D. Endorsement:

Date/Time:

14082018 9:14am

Person Contacted:

Alex

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SFX 915M - C02/ALH14005331/RUBW2

DOA: 190314

SHD 7132 R - C04/ASN18014604/KIPU3

DOA: 08082018

Signature

Taufik

REF:

III

ASSIGNMENT

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.

Bal. or Market Value:

IDAC Accident Rpt:

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

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SFX 915M.

Yr Regn:

03/07/2017

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

Truck / Trailer or

Make:

Toyota Valfone.

C.C.

3456.

Colour:

Black.

A/C

Insured / Std / NI / NA

Sp. Reading:

36835

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

GGH50 0018396.

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:

245/40R20

R:

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

TOYO / YOKO or

Front

Rear

R/Bal:

6

mm

R/Bal:

6

mm

L/Bal:

6

mm

L/Bal:

6

mm

D.O.A.

D.O.I.

14/8/180420.

Survey held at

HS Putuma h.v.o.

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

Frt N/S

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

Date / Time

Action / Instruction

2 keku kuku + the 2 #01/15

12/04/19 Confirmed HS \$ 2,800/- @ 3 days with Adrian (on behalf finaster), reviewed by Taufik

(\$ 8,219.70 - Red - 75%)

RECEIVED 12 APR 2019

Date/Time: File Pass to?

12/04/19

1)

Typ 4

Date/Time: File Return to?

2)

Report Format:

Lump Sum / I.B.E. (\$) 2,800/- HS

☐

: Preli. Report

☒

: Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Survey Fee:

360

Transportation:

\$ - RS - \$

Photos

Libert

TOTAL

10

360

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

Weekend (\$

Catherine Chong (LKK Auto)

From: Motor Claim - III <motorclaim@iii.com.sg>
Sent: Monday, 13 August, 2018 1:43 PM
To: Sim Teo Koon; 'sur@lkkauto.com'; Catherine Chong (LKK Auto)
Cc: Sherini Pillai
Subject: RE: OUR REF: JEQ/SFX915M/HSEC accident involving SFX915M & SHD7132R on 08/08/2018
Attachments: survey joel_20180813120645.pdf

Dear Sir / Mdm,

Please conduct a survey on TP vehicle SFX915M and let us have your report urgently.

This claim will be handled by Ms Sherini.

*Kindly 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: Sim Teo Koon [mailto:tk_sim@juseq.com.sg]
Sent: 13 August, 2018 12:50 PM
To: Motor Claim - III <motorclaim@iii.com.sg>
Cc: Sherini Pillai <sherini@iii.com.sg>
Subject: FW: OUR REF: JEQ/SFX915M/HSEC accident involving SFX915M & SHD7132R on 08/08/2018

Dear Sir,

We refer to your email.

Our client is agreeable to appoint Xing Guo Qiang / Adrian Ling (LKK Auto Consultants Pte Ltd) as a single joint expert.

Please be informed that our client's motor vehicle is available for inspection at the under-stated workshop: -

H S Motor Engineering

Blk 2 Kaki Bukit Avenue 2 #01-15

Kaki Bukit AutoHub,

Singapore 417921

Person In-Charge: Ms. Connie. Tel: 6747 2755

Regards,

Sim Teo Koon (On behalf of Mr Michael Yap)
JusEquity Law Corporation

171 Chin Swee Road #02-06, CES Centre
Singapore 169877
Tel: 6506 6488 / 6536 9339
Fax: 6536 5368
E-mail: tk_sim@juseq.com.sg

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From: Motor Claim - III [<mailto:motorclaim@iii.com.sg>]
Sent: Monday, August 13, 2018 12:15 PM
To: JUSEQ <juseq@singnet.com.sg>
Cc: Sherini Pillai <sherini@iii.com.sg>
Subject: OUR REF: JEQ/SFX915M/HSEC accident involving SFX915M & SHD7132R on 08/08/2018

FW: PRE-REPAIR INSPECTION FOR VEHICLE NO. SFX915M (ACCIDENT INVOLVING SFX915M & SHD7132R on 08/08/2018)

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

Best Regards,
Joel Nah

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

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

Shirley Hiew (LKK Auto)

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Thursday, 11 April 2019 11:52 AM
To: 'ALEX LEE'
Cc: SUR
Subject: RE: SFX 915M (TP) SHD 7132R (OI) DOA - 08/08/2018

Hi Alex,

Final invoice and all supporting documents sent over to **India International Insurance Pte Ltd.**

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: ALEX LEE [mailto:hsautomotivespl@gmail.com]
Sent: Thursday, 11 April 2019 11:39 AM
To: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Subject: Re: SFX 915M (TP) SHD 7132R (OI) DOA - 08/08/2018

Hi,
Agreed and accepted.
Tks

On Thu, 11 Apr 2019 at 11:25, Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com> wrote:

Hi Alex,

Please Confirm final fig \$2,800.00 (lump sum) @ 3 days of repairs.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: Sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

--

Dear Sir/mdm

with regards,
Connie Chang

M:9683 5528

T: 65381368

F: 65381367

**BLK 2 KAKI BUKIT AUTOHUB
KAKI BUKIT AVE 2 #02-25
SINGAPORE 417921.**

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MOR118102782 / ETHOZ Protect Pte Ltd - Bukit Batok
ENTRY DATE & TIME: 08/08/2018 17:05
SUBMITTED BY: Jonathan Lim Kok Siong

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 08/08/2018 17:05
Date Of Accident 08/08/2018 13:50
Exact Location Of Accident ALONG KILLINEY ROAD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFX915M
Insured/Policyholder
Name Of Registered Owner AUDREY KOH KARMEN
NRIC No S73258901
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-96617758
Alternative Phone No OFFICE-96617758
Vehicle Particulars
Manufacturer TOYOTA
Model VELLFIRE 3.5ZA G-EDITION AT 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? NO
If No, Please state action to be taken THIRD PARTY
Vehicle Category PRIVATE CAR

Insurance Company
Name of Insurance Company AXA INSURANCE PTE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number GA235579/1
Cover Note Number 03/07/2018-02/07/2019

Driver
Name of Driver ONG WU KHENG JEREMY
NRIC No S7528614G
Date Of Birth 19/09/1975
Occupation OUTDOOR
Date Of Driving Pass 29/12/1995
Driving Experience 22 YEARS AND 7 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-90177855
Fax Number
Contact Number
EMail Address NOEMAIL

Address

Postcode

BLK 172 HOUGANG AVENUE 1

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

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 2

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) 2

Passenger 1

NAME: : AUDREY KOH KARMEN

GENDER: : FEMALE

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 ATTACHMENT

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

SHD7132R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

SUM CHEE KUEN

NRIC/Passport Number

S1797130A

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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)**

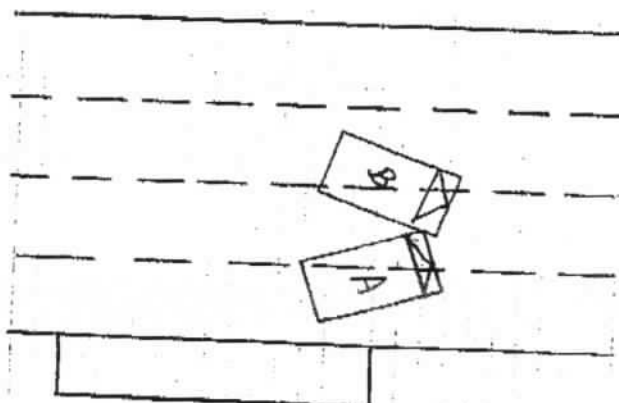
I understand, acknowledge, agree and consent that:

- (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.

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

Sketch Plan Pg. 2

SKETCH PLAN



A - SFX915M

B - SHD7132R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was turning out from the drop off point.
 Suddenly I felt a knock from my front left. Immediately
 I stopped my vehicle and came down noticed a
 taxi had collided into my vehicle which ~~was~~
 intended to filter into my lane.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only

Claim OD

Claim TP

☒ Claim OD / TP at other workshop

DECLARATION

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

Policyholder's Signature
 Date & Time:

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

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



HS MOTOR ENGINEERING

Blk 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 email: hsmotorengineering@gmail.com

DIRECT SETTLEMENT

Vehicle No : SFX 915M
Make/Model : TOYOTA VELLFIRE
CHASIS NO : GGH30-0018396
Name : HS MOTOR ENGINEERING
Address : c/o Blk 2 Kaki Bukit Ave 2
#02-25 Autohub@Kaki Bukit
Singapore 417921
Accident Date : 8-Aug-18
OWNER : AUDREY KOH KARMEN
ADD : BLK 440C FERNVALE LINK #08-153 SINGAPORE 793440.
DRIVER : ONG WU KHENG JEREMY
ADD : BLK 172 HOUGANG AVE 1 #

WORKSHOP REPAIR ESTIMATES

Date : 13-Aug-18

Page 1 of 1

S/NO	QTY	List Items
1	1 pc	FRONT BUMPER
2	1 pc	FRONT BUMPER CLIP SET
3	1 pc	FRONT BUMPER SIDE RETAINER (LH)
4	1 pc	FRONT BUMPER FOG LAMP (LH)
5	1 pc	FRONT BUMPER TOP RETAINER (LH)
6	1 pc	FRONT BUMPER TOW COVER (LH)
7	1 pc	FRONT BUMPER LOWER GRILLE
8	1 pc	FRONT BUMPER LOWER SKIRT
9	2 pcS	FRONT BUMPER PARKING SENSOR X 2 (LH)
10	1 pc	FRONT HEADLAMP (LH)

Parts SUBTotal 1

Special Nett Items

11	1 PC	FRONT BUMPER BODY KIT
----	------	-----------------------

SEPCIAL NETT ITEMS TOTAL

LABOUR

12	TO PANEL BEATING AND REPLACE PARTS
13	TO RESPRAY PAINTING TO AFFECTED PORTION
14	TO CHECK AND RECTIFY WIRING SYSTEM

LABOUR TOTAL SUM

PARTS AND LABOUR TOTAL SUM

\$ 11,019.70

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Repairer's Estimate

UNIT PRICE (S\$) AMOUNT (S\$)

\$ 1,415.30	cut-
\$ 110.10	re. 30
\$ 165.10	re. 85
\$ 329.00	x nn
\$ 110.35	re
\$ 60.20	x nn
\$ 399.45	x nn
\$ 455.10	x nn
\$ 509.10	?
\$ 1,018.20	560
\$ 3,606.90	x nn

\$ 7,669.70

\$ 1,550.00

\$ 1,550.00

\$ 800.00

\$ 500.00

\$ 150.00

\$ 1,800.00

Tangkh 97495749
WP 14/5/18 420pm
Lunyan
Ready after repair - 3 days
sure/khantawm

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

WP

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	16 Aug 2018 Edit Reg		13 Aug 2018 00:00 Edit Adj Rpt	S\$2,800.00 Edit Estimates	S\$2,800.00 View Rpt		Pending for Survey Report Cancel Case






































Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by adjuster]									
Insured:	-, Co. Reg. No.: -								
Main Claimant:	AUDREY KOH KARMEN , ID: S73256901								
Vehicle Reg. No.:	SFX915M	Date of Loss:	08/08/2018 00:00 - :59 [13 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / MCT18080238	Policy/Cover Note No.:	MCOM0015						
Vehicle Reg. No. (Insured):	SHD7132R	Policy No. (Claimant):							
		Excess:							
Repairer:	Hs Automotive (HQ) autohub, 408070 Kaki Bukit - Tel:								
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sherini Pillai]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 27/08/2018]								
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

***SFX915M (MCT18080238)**
[SHD7132R]
TP
AUDREY KOH KARMEN
Aug 8 2018 12:00AM
[-]
Hs Automotive

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

View [View in Browser](#)

Photos/Images			3 per page	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	12/04/19 09:55	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
2	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
3	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
4	12/04/19 09:55	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
5	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
6	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
7	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
8	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
9	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
10	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
11	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
12	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
13	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
14	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
15	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
16	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
17	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
18	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
19	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
20	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
21	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
22	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
23	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
24	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
25	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
26	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
27	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
28	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
29	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
30	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
31	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
32	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
33	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
34	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
35	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
36	12/04/19 09:55	General View	 Load JPG	<input checked="" type="checkbox"/>
37	12/04/19 09:55	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

Photos/Images			3 per page	✓
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
38	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
39	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
40	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
41	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
42	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
43	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
44	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
45	12/04/19 09:55	Reinspection Photo	 Load JPG	✓
Documentation			1 per page	✓
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	16/08/18 09:43	Singapore Accident Statement	 Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ) <div style="border: 1px solid black; height: 100px; width: 100%;"></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/III18014718/T1SBE2

Date: 12/04/2019

REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

MCOM0015

Claimant Vehicle
No : SFX915M

Insured Vehicle No : SHD7132R

Date of Loss: 08/08/2018

Nature of Claim: TP

Claim No: MCT18080238

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SFX915M

Make & Model: TOYOTA VELLFIRE, 3.5 V (A)

Engine No: 2GRK387063

Reg. Date: 03/07/2017 (Man. Year: 2017)

Chassis No: GGH300018396

Colour: Black

Odometer: 36833 km

Engine Capacity: 3456 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: 245/40 R20

Rear Tyre Size: 245/40 R20

Front Left Side: Michelin 6 mm

Rear Left Side: Michelin 6 mm

Front Right Side: Michelin 6 mm

Rear Right Side: Michelin 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	9,219.70	2,650.49	6,569.21	71.25
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,800.00	860.00	940.00	52.22
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	11,019.70	3,510.49	7,509.21	68.14
Approved Total (Overridden) (S\$)		2,800.00		
Nett Amount (S\$)	11,019.70	2,800.00	8,219.70	74.59

INSPECTION

Date of Assignment: 13/08/2018

Date Inspected: 14/08/2018 Inspected At:

Hs Automotive (HQ)
2 KAKI BUKIT AVE 2
#01-15 KAKI BUKIT AUTOHUB
SINGAPORE 417921

Estimated Period of Repair: 3.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: Hiew May Fung

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: 12 Apr 2019)
Parts:	M1-MPV	TOYOTA VELLFIRE 3.5 V (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SFX915M)	
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	Cut	1,415.30 F	*1,415.30 FL
2	1		*SET FRONT BUMPER CLIP	Necessary	110.10 F	*30.00 FL
3	1		*FRONT BUMPER SIDE RETAINER (LH)	Necessary	165.10 F	*85.00 FL
4	1		*FRONT BUMPER FOG LAMP (LH)	Not Necessary	329.00 F	*- FL
5	1		*FRONT BUMPER TOP RETAINER (Lh)	Necessary	110.35 F	*110.35 FL
6	1		*FRONT BUMPER TOW COVER (LH)	Not Necessary	60.20 F	*- FL
7	1		*FRONT BUMPER LOWER GRILLE	Not Necessary	399.45 F	*- FL
8	1		*FRONT BUMPER LOWER SKIRT	Not Necessary	455.10 F	*- FL
9	2		*FRONT BUMPER PARKING SENSOR (LH)	Not Working	1,018.20 F	*560.00 FL
10	1		*FRONT HEADLAMP (LH)	Not Necessary	3,606.90 F	*- FL
11	1		*FRONT BUMPER BODY KIT	Deformed	1,550.00 FS	*1,000.00 FS
					Sub Total (S\$)	9,219.70 3,200.65
					- List Item Discount on L Items 0.00/25.00% (S\$)	0.00 550.16
					Total Parts (S\$)	9,219.70 2,650.49

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	TO PANEL BEATING AND REPLACE PARTS	New	800.00	300.00
2	TO RESPRAY PAINTING TO AFFECTED PORTION	New	850.00	500.00
3	TO CHECK AND RECTIFY WIRING SYSTEM	New	150.00	60.00
Gross Labour Cost (S\$)			1,800.00	860.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >