

ASS. REC. BY:

REF: CS/EGL18014719/Rirber

Special Instruction:

Surveyor: Rosul

ASSIGNMENT (Office)

From (Person): Yee Pei Li

of

EGL

Date/Time: 13/08/2018 5:21pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBK 7194P

Insured:

YL 3605B

at Workshop m/s

Southern Motor

Tel:

6273 0369

of

Blk 1006 Bukit Merah Lane 2 #01-10

Policy No:

Claim No:

DSMCV1801501

Sum Insured:

Excess:

Make of Veh:

D.O.A. 06/08/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP'

H.O.D. Endorsement:

Date/Time:

14/08/2018 9:23am

Person Contacted:

Mr. Lim

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate	
	FBK 7194P - NBA / ZNC18014305/Y	DA: 06/08/2018
	YL 3605B - NN / FCL13016571/d2	DA: 06/09/2013
	Confirm \$4617.60 @ 3 days	
	Red: \$767.50, 14't	

(08/11/13)

REF:

26713

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: FBK 7794P

at Workshop m/s Southern Motor

of 1006 SM W2 # 01-10

Insured: EQI / W

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: FBK 7794P Yr Regn: 2016 / FEB

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

Truck / Trailer or

Make: Suzuki GSX1300 C.C. 1340

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

Sp. Reading: 32091 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JS1CK1116G0100191

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: 126/702R17

R: 190/552R17

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

TOYO / YOKO or

Front

Rear

R/Bal. 4 mm R/Bal. 4 mm

L/Bal. mm L/Bal. mm

D.O.A. 06/08/18 D.O.I. 14/08/18

Survey held at Southern Motor

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

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

Date / Time Action / Instruction

RECEIVED 11 SEP 2018

10/9/2018.

Date/Time, File Pass to?

: Preli. Report

1) typist

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format : TP

Lump Sum / I.B.I. (\$) 4617.60

250

250

Catherine Chong (LKK Auto)

From: Survey Report (ERGO Insurance Pte. Ltd.) <Survey.Report@ergo.com.sg>
Sent: Monday, 13 August, 2018 5:21 PM
To: 'admin-d@lkkauto.com'
Cc: 'ASSIGNMENTS@LKKAUTO.COM'
Subject: OI : YL3605B / TP : FBK7794P/LKK / DOA : 06/08/2018 (DSMCV1801501)
Attachments: YL3605B - SAS.pdf; FBK7794P - SAS.pdf; FBK7794P - ESTIMATE.pdf; FBK7794P - PRS FORM.pdf

Dear Catherine/Nivitha,

In compliance with "State Courts Practice Directions Amendment No.1 of 2016" in regards to the Pre Repair Survey, both TP repairer and ERGO Insurance Pte Ltd have agreed on your company **LKK AUTO CONSULTANTS PTE LTD** to be the "Single Joint Expert".

Please conduct this survey request from **SOUTHERN MOTOR**

ADDRESS : BLOCK 1006 BUKIT MERAH LANE 2
#01-10
SINGAPORE 159762

PERSON TO CONTACT : MR LIM @ 6273 0369

ERGO OFFICER-IN-CHARGE : STEVE LIM

Note: To survey on without prejudice basis. Please advise the consistency of damages to third party vehicle that you are require to conduct a re-survey before vehicle is returned to claimant. They are to contact your office directly. Please do keep us in the loop.

Please fill up the necessary on ERGO PRS Form from workshop and return to us together on your update of the survey status via Survey.Report@ergo.com.sg.

Attached are estimate, our insured's and TP's SAS (note: reports not to be released to any Third Party).

Kindly acknowledge receipt of this email.

Regards,
Yee Pei Li
Claims Assistant (Motor)

ERGO Insurance Pte. Ltd.

5 Temasek Boulevard, #04-01 Suntec Tower Five
Singapore 038985
DID.: +65 6829 9194
Tel.: +65 6829 9199
Fax: +65 6829 9247

ERGO

www.ergo.com.sg

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers

ERGO

Date: 13.08.2018
Our Reference: DSMCV1801501/SL/pl
Your Reference: FBK 7749P *FBK 7794P*
To: SOUTHERN MOTOR

Sent via Fax: 6274 6614
or
Email

Pre-Repair Survey (PRS) Acknowledgement

Vehicle For Inspection: FBK 7749P *FBK 7794P* ✓
Insured's Vehicle: YL3605B
Date Of Accident: 06.08.2018
We acknowledge receipt of your request for PRS on: 13.08.2018

In compliance with "State Courts Practice Directions Amendment No.1 of 2016", do select an assessor from the list below and indicate your selection in the box marked *.

*

AIS	Automobile Inspection Services Pte Ltd	LOS	L.D.S Auto Consultants Pte Ltd
FTA	FormTeam Consultancy Pte Ltd	LKK	LKK Auto Consultants Pte Ltd
IAI	Infiniti Appraisal Service	PS	Priority Services
IPK	JP Knight's Pte Ltd	VAC	Vicom Ltd

- ☐ Your request for inspection does not have your client's cost of repair estimate, kindly forward a copy.
☐ Your request for inspection does not have your client's GIA report, kindly forward a copy.
☐ We acknowledge your interest for direct settlement, we will assess & revert soon upon receipt of estimate.
☐ Our insured's driver has not reported the accident to us to date.
☒ Others: OFFICER-IN-CHARGE - STEVE LIM

Prepared by: *PE* Per Li 6829 9194 claims@ergo.com.sg
Signature: FAX: 6829 9247

Assessor use only:

Assignment Date: _____
Assignment Time: _____

Remarks:

Workshop use only:**Assessor attended workshop on:**

Date: _____
Time: _____
Inspector: _____

☐ Vehicle not available at the appointed date and time.

Kindly acknowledge our Assessor presence for the above job.

Workshop Acknowledgement & Stamp.

Note: Our inspection is on a without admission to liability basis.

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 09:17
Date Of Accident	06/08/2018 08:30
Exact Location Of Accident	SLIP RD ON WOODLANDS AVE 6 TOWARDS WOODLANDS AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK7794P
Insured/Policyholder	
Name Of Registered Owner	KONG KIN FAI (JIANG JIANHUI)
NRIC No	S8932671J
Email Address	XZENONX@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91882151
Alternative Phone No	OTHERS-91882151

Vehicle Particulars

Manufacturer	SUZUKI
Model	GSX1300RLO-1.3

Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5099807169
Cover Note Number	

Driver

Name of Driver	KONG KIN FAI (JIANG JIANHUI)
NRIC No	S8932671J
Date Of Birth	18/09/1989
Occupation	INDOOR
Date Of Driving Pass	04/04/2018
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91882151
Fax Number	
Contact Number	OTHERS-91882151
Email Address	XZENONX@GMAIL.COM

Address	BLK 683C WOODLANDS DRIVE 62
	#06-145
Postcode	733683
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03, POSTCODE: 149073, COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180806/2110

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	YL3605B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHAN CHOONG YIH
NRIC/Passport Number	S7979635B
Contact Number	94524666
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

*Ergo Insurance Pte Ltd
 5 Temasek Boulevard
 #04-01
 Suntec Tower Five
 Singapore 038985
 Tel 68298189
 Fax 68298247*

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: ;

GENDER: ;

DETAILS OF INJURED PERSON 1

Name

KONG KIN FAI (JIANG JIANHUI)

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBK7794P

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

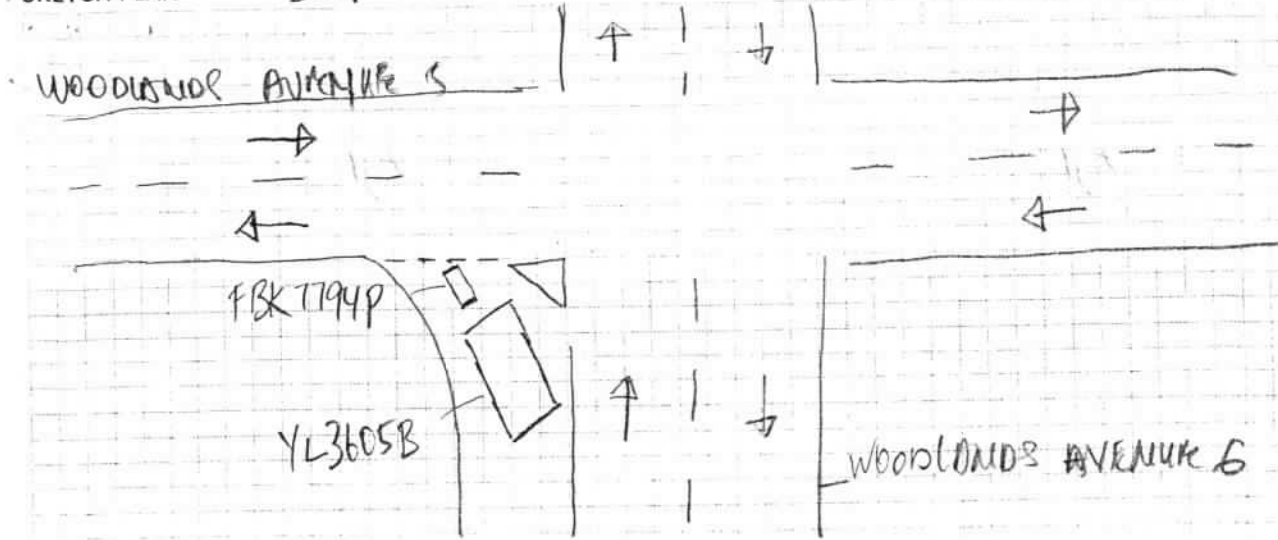
NO

Address

Postcode

SKETCH PLAN

Slip Road from WOODLANDS AVE 6 TOWARDS AVENUE 5



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS Refer to Police Report
7/201806/2110

DECLARATION

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

Policyholder's Signature
Date & Time: 06/08/2018

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

Reporting Centre Personnel's Signature
Name: *Kelli Watts*
NRIC/FIN No.: *071082018*

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: 06/08/2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180806/2110

1 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180806/2110

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/08/2018 15:10	Vide Report No.:	Station Diary No.: 55
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Informant's Particulars			
Name of Informant: KONG KIN FAI		Address: APT BLK 683C WOODLANDS DRIVE 62 #06-145 SINGAPORE 733683	
ID Type / ID No.: NRIC NO / S8932671J		Contact No.: Home/Office: Mobile: 91882151	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 28	Date of Birth: 18/09/1989	Type of Informant: Rider
Race: Chinese		Language: English	Institution / School Name:
Occupation: PROCUREMENT OFFICER		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/08/2018 08:30	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 WOODLANDS AVENUE 6 WOODLANDS AVENUE 5 Slip road of Woodlands Avenue 6 towards Woodlands Avenue 5				
Weather: Sunny		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK7794P	Motorcycle	SUZUKI	GSX1300RA L6 (HAYABUSA ABS)	Red	Seriously Damaged	0
YL3605B	Lorry	NISSAN	YU41T4	White	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180806/2110

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBK7794P	NTUC Income Insurance Co-Operative Limited	5099807169	11/04/2018	10/04/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	KONG KIN FAI		ID No.	S8932671J
Related Vehicle	FBK7794P (Motorcycle)		Contact No.	91882151
Hospital/Clinic	SHALOM CLINIC & SURGERY		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	06/08/2018		Date Discharge	NIL
No. of Days granted Medical Leave		03	Degree of Injury	Slight
Driver				
Name	Chan Choong Yih		ID No.	S7979635B
Related Vehicle	YL3605B (Lorry)		Contact No.	94524666
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On the 6th August 2018, at about 0830am, I was riding my motorcycle along Woodlands Avenue 6. I then made a left into the slip road, and stopped at the give way line to check for incoming vehicle along Woodlands Avenue 5. As I was checking a lorry from behind hit onto my motorcycle and I toppled to the ground. I then got up to check on my vehicle for damages. The exhaust of my motorcycle had been cracked, rear taillight broken, reflector broken, scratches on the front left fairing and handle bar misaligned. I then took pictures of my vehicle damages and exchanged particulars with the lorry driver. Towing was called as my vehicle handle bar was misaligned and unable to be driven. No ambulance was called as I was feeling normal. However after a few hours, I felt pain in my back hence proceeded for a medical checkup at Shalom Clinic.



**SINGAPORE
POLICE FORCE**



T/20180806/2110

3 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180806/2110

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: D / Sgt 3 NG YONG XIN, ALESTER	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/08/2018 15:10
Officer In Charge Of Case: TP / AEIT / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	SN 47
SIGNATURE	



南方摩哆 SOUTHERN MOTOR

Block 1006, Bukit Merah Lane 2, #01-10
Singapore 159762 Tel:62730369 Fax:62746614

Repair & Dealing in New & Second-hand Motor-cycles, Scooters & Insurance Agent

Date:

Motor Claims Department
Engo Insurance Pte Ltd
5 Temasek Boulevard #04-01
Sumtel Tower Five
Singapore 038985

Dear Sirs, Re: Cost of repair to Ayuki's R1300 R10 - PRK 7794P

1 pc of Front fairing	585	585.00	repair
- Front fairing bracket	480	480.00	? & 1/2
- Body sliders	160	160.00	scr
- Magneto cover		190.00	repair
- Magneto clutch gasket	19	19.00	scr
- Clutch lever	85	85.00	scr
- Exhaust pipe	2600	2600.00	scr
- Tail cover	460	460.00	scr
- Tail light	720	720.00	scr
- No plate light	90	90.00	scr
- Windscreen	285	285.00	scr
- Mirror	165	165.00	scr

4664. 5439.00
10% 543.90
4197.60 4895.10

Less 10%

Nett

Transport 420 4000 /
Engine oil 1000 1000 / 80
Labour 3500 300

Rashid

Hp 90010018

3 days

P/P

14/08/18 @ 1220

Resing by paint

JA 538510

4197.60

420.00

4617.60

3 days

Tel 68299199

Fax 68299247

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:

Yours faithfully,
SOUTHERN MOTOR



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				
ERGO INSURANCE PTE LTD			Ref : CS/EGI18014719/R1rbe2	
5 TEMASEK BOULEVARD #04-01 SUNTEC TOWER FIVE SINGAPORE 038985			Date : 18-10-2018	
			Code : EGI	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	YL 3605B	Veh. Inspected	FBK 7794P	
Policy No.		Coverage (\$)	0.00	
Claim No.	DSMCV1801501	Excess (\$)	0.00	
Assign From	YEE PEI LI	Assign Date	13/08/2018	
2. Vehicle Particulars & Condition				
Make & Model	SUZUKI GSX1300	c.c	1340	
Engine No.	HIDDEN	Year of Reg.	2016	
Chassis No.	JS1CK1116G0100191	Colour	RED	
Odometer	32091	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	120/70Z R17	PIRELLI	4 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	190/55Z R17	PIRELLI	4 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S AND N/S BODY. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	06/08/2018	Inspection Date	14/08/2018	
Survey held at	SOUTHERN MOTOR BLOCK 1006 BUKIT MERAH LANE 2 #01-10 SINGAPORE 159762			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		

**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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. FBK 7794P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	FRONT FAIRING	TO REPAIR SEE LABOUR	585.00	-
1	FRONT FAIRING BRACKET	BENT	480.00	480.00
1	BODY SLIDERS	SCRATCHED	160.00	160.00
1	MAGNETO COVER	TO REPAIR SEE LABOUR	190.00	-
1	MAGNETO GASKET	NECESSARY	19.00	19.00
1	CLUTCH LEVER	SCRATCHED	85.00	85.00
1	EXHAUST PIPE	SCRATCHED	2,600.00	2,600.00
1	TAIL COVER	CRACKED	460.00	460.00
1	TAIL LIGHT	BROKEN	320.00	320.00
1	NO PLATE LIGHT	CRACKED	90.00	90.00
1	WINDSCREEN	SCRATCHED	285.00	285.00
1	MIRROR	SCRATCHED	165.00	165.00
	LESS 10% DISCOUNT		-543.90	-466.40
			4,895.10	4,197.60
	<u>SPECIAL NETT ITEMS</u>			
1	ENGINE OIL (SN)	NECESSARY	100.00	80.00
			100.00	80.00
	<u>LABOUR</u>			
	TRANSPORT.		40.00	40.00
	LABOUR. INCLUSIVE OF THE REPAIR OF FRONT FAIRING AND MAGNETO COVER.		350.00	300.00
			390.00	340.00
	GRAND TOTAL		5,385.10	4,617.60
RECOMMENDED COST OF REPAIRS				4,617.60

Report Ref No. CS/EGI18014719/R1rbe2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

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