

22/03/2002

ASS. REC. BY:

REF:

CS/MS(1180161142 / Klsb2

Special Instruction:

SURVEYOR

ASSIGNMENT (Office)

Member

From (Person): Monica Chung

of

MSH

Date/Time: 04/09/2018 3:59pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHC 6033E

Insured:

SGU 7348H

at Workshop m/s

Premier

Tel:

65114 6685

of

33 Changi South Ave 1 #03-02

Policy No:

B27435702SMP

Claim No:

569247

Sum Insured:

Excess:

Make of Veh:

D.O.A.

31-08-2018

(Client's Record)

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

05092018

H.O.D. Endorsement:

Date/Time:

04/09/2018 0444pm

Person Contacted:

Vincent

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SHC 6033E - CS/FCL17024047 / Klg372 DCA: 15-12-2014
	SGU 7348H - CS/ALH14002160 / RUG302 DCA: 03-05-2014
07/09/18	@ 15:09 p.m. revised IA to Monica Chung via member

8/21 4600

(08/11/82) wef

ASS. REC. BY:

K9/m

REF: MSIG

ASSIGNMENT

From:

Date: 5/9/18

Estimated Cost:

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

To Inspect Vehicle No:

SHC 6033E

at Workshop m/s

Premier

of

23 Changi South Ave 2 #0302

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

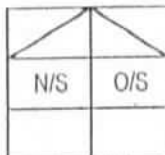
(Client's Record)

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

kup

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SHC 6033E

Yr Regn:

13 Jun 2014

Type: M.Car / M.Cycle / Bus / Van / Lorry / T61 / Prime Mover /

Truck / Trailer or

Make:

KIA optima

c.c

1685

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

478930

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

KNATHM 414 MES4 63514

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

205/65R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

4/8/18

D.O.I.

5/9/18

Survey held at

Premier

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

Rear

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

Date / Time

Action / Instruction

14/9/18

Confirmed up \$1350/ 3 days

41

14/09/18

Confirmed HS \$1,350/- @ 3 days with Kalvin.
(\$650.74 Red. 33%)

RECEIVED 14 SEP 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:

190

Transportation:

S + RS, SI

Photos

Others

10

TOTAL

160

Report Format :

Lump Sum / I.B.I. (\$ 1,350/- L/S)

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	03 Sep 2018		04 Sep 2018 15:59 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
------	-----------	---------------	-----------	----------

CLAIM SUBFOLDER DETAILS				[Created by insurer]
Insured:	Mohamed Sa'at bin Abdul, Rahman, ID: S1431063J			
Main Claimant:	PREMIER TAXIS PTE LTD, Co. Reg. No.: 200304975H			
Vehicle Reg. No.:	SHC6033E	Date of Loss:	31/08/2018 17:00 - :59 [50 Months and 18 Days From LTA Reg Date (Man Yr)]	
Claim Type:	TP / 569247	Policy/Cover Note No.:	B27435702SMP (Comprehensive) Coverage: 30/11/2017 - 29/11/2018	
Vehicle Reg. No. (Insured):	SGU7348H	Policy No. (Claimant):		
		Excess:		
Repairer:	Premier Taxis Pte Ltd - Changi (HQ) 23 Changi South Ave 2 #03-02, 486443 Changi - Tel:			
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Monica Chung Pei Zhen - 6594 2552]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 05/09/2018]			
Driver/Custodian (Insured):	FAEZAH BINTE MOHAMED SA'AT (29 / Female), NRIC: S8851743A			
Adj Asg. Remarks:	SJE AGREE LKK. Liab-100%. Contact: 65446676 / 65446689			

ASSOCIATED MAIL RECEIVED		View All	Compose Case Mail
There are no mail for this case.			

ALL ASSOCIATED TASKS									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

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: Monica Chung Pei Zhen

Date: 07 Sep 2018

Preliminary Advice

Insured Vehicle No	: SGU7348H	Accident Date	: 31/08/2018
TP Vehicle No	: SHC6033E	Assignment Date	: 04/09/2018
Make	: KIA OPTIMA	Est. Duration of Repair	: 3 days
Date of Inspection	: 05/09/2018		
Inspection At	: Premier Taxis Pte Ltd - Changi (HQ) 23 Changi South Ave 2 #03-02 Singapore 486443		

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	2,000.74
Revised Amount	:S\$	1,213.09
Check Items (Estimated)	:S\$	507.65
Total	:S\$	1,720.74

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.

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	03/09/2018 14:18
Date Of Accident	31/08/2018 18:00
Exact Location Of Accident	CTE - SUNTEC CITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6033E
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

Driver

Name of Driver	LEE BOON SWEE
NRIC No	S1129336J
Date Of Birth	08/03/1955
Occupation	OUTDOOR
Date Of Driving Pass	03/12/1976
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92241688
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 209 #15-90 COMPASSVALE LANE
Postcode	543209
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	2
Passenger 1	NAME: : PAX IN THE REAR SEAT - CHINESE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NPC
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

VEH. A - 1 PAX VEH. B - 2 PAX VEH. C - NO PAX *REFER TO THE ATTACH POLICE REPORT

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	SGU7348H
Vehicle Make/Model/Colour	BMW
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	FEMALE MALAY
NRIC/Passport Number	
Contact Number	91695126 - HUSBAND'S HP
Address	

Postcode

Insurance Company Name

Nature Of Damage DAMAGED ON THE FRONT & REAR

No. Of Passenger (Including Driver) 3

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SBV2219J

Vehicle Make/Model/Colour HONDA CIVIC

Details Of Properties VEH. C

Vehicle Category PRIVATE CAR

Name of Driver MALE INDIAN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage DAMAGED ON THE FRONT PORTION

No. Of Passenger (Including Driver) 1

DETAILS OF INJURED PERSON 1

Name LEE BOON SWEE - DRIVER OF VEH. A

Approximate Age

Injuries Sustain WENT TO CLINIC FOR TREATMENT & HAD 4 DAYS MC

Injured person in which vehicle? SHC6033E

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

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.



03 SEP 2018

[Signature]

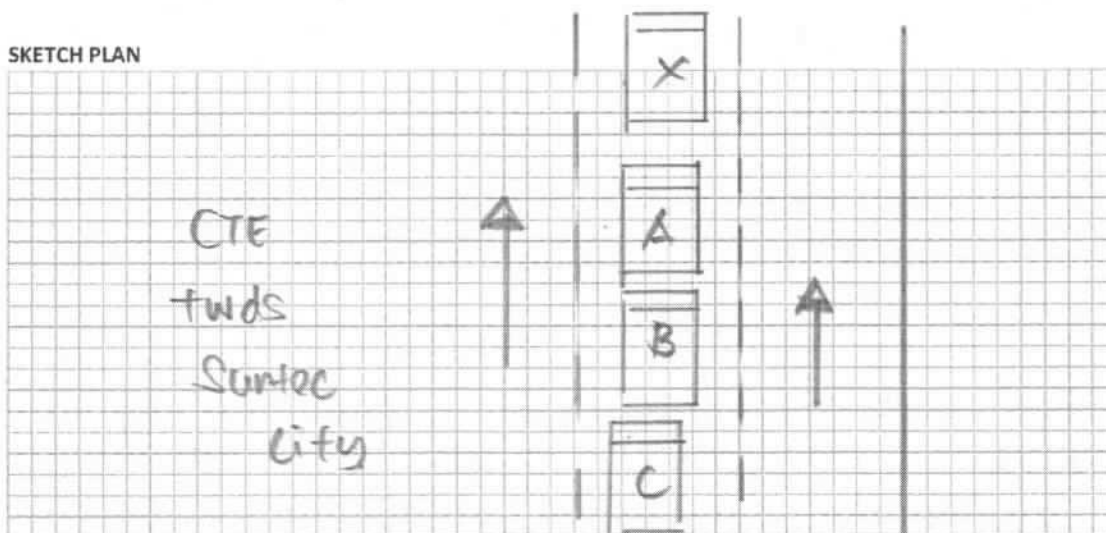
Policyholder's Signature
Date & Time:

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

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

1129336/1
L S/H C 60334

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHC 6033E

B: SGU 7348H

C: SBV 2219J.

* Refer to attach police report

* Video footage captured.

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: 1109336/J
SHC 6033E

03 SEP 2019

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

(Signature)



**SINGAPORE
POLICE FORCE**



T/20180901/2011

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20180901/2011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/09/2018 01:48		Vide Report No.:		Station Diary No.: 24	
Informant's Particulars					
Name of Informant: LEE BOON SWEE			Address: APT BLK 209C COMPASSVALE LANE #15-90 SINGAPORE 543209		
ID Type / ID No.: NRIC NO / S1129336J			Contact No.: Home/Office: Mobile: 92241688		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 63	Date of Birth: 08/03/1955	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 31/08/2018 18:05	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY Towards suncity				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
SBV2219J	Car				Slightly Damaged	1
SGU7348H	Car Of Case				Slightly Damaged	3
SHC6033E	Car SIEU LIN				Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20180901/2011

2 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180901/2011

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE BOON SWEE	ID No.	S1129336J
Related Vehicle	SHC6033E (Car)	Contact No.	92241688
Hospital/Clinic	HORIZON MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	31/08/2018	Date Discharge	31/08/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On 31/08/2018, at about 1805hrs, I had drove my taxi bearing plate number: SHC6033E along CTE towards Suntec city, first lane. There is 1 passenger in my said taxi.

As there was an oncoming ambulance, I had filtered to the second lane. As I was driving, a car ahead of me had suddenly applied an emergency brake. I abled to stopped on time after applying emergency brake, however there were 2 other cars behind me who had collided to me. The car whom front part of the vehicle had hit my rear taxi is, SGU7348H. Subsequently, a car bearing SBV2219J had collided to him.

I had alighted from my vehicle to exchange particulars, after which we had then left. I had then proceeded to seek medical attention as I've got body ache due to the accident at Horizon Medical PTE LTD and was certified with 4-day MC from 31/08/2018-03/09/2018. There is also in car camera in my vehicle. I am lodging a report for investigation.



**SINGAPORE
POLICE FORCE**



T/20180901/2011

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3
Report No. T/20180901/2011

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 NOR'AISSAH BINTE MOHD PERDAUS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
01/09/2018 01:48

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151

Classification Of Case:

Authentication Stamp
NP158

Signature: _____

Singapore Police Force

Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	13 Jun 2014 / 09:12:39	Receipt No.:	AACCK001-AX239-140613-000006
Asset Type:	Vehicle	Transaction Amount:	\$70,018.00
Asset ID:	SHC6033E	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20140613091239018880		
Vehicle No.:	SHC6033E		
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-		
Vehicle Attachment 3:	-		
Vehicle Scheme:	Taxi (Company)		
First Registration Date:	13 Jun 2014		
Original Registration Date:	13 Jun 2014		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414ME5463514		
Engine No.:	D4FDDH309735		
Motor No.:	-		
Trailer Chassis No.:	-		
Propellant:	Diesel		
Passenger Capacity:	4		
Engine Capacity:	1685		
Power Rating:	-		
Unladen Weight:	1584		
Maximum Laden Weight:	2050		
Primary Color:	Silver		
Secondary Color:	-		
Manufacturing Year:	2013		
Open Market Value:	\$20,028.00		
Minimum PARF Benefit:	\$7,524.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	13 Jun 2014 09:12:39		
COE No.:	2014061301001196G		
COE Expiry Date:	12 Jun 2022		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$57,338.00		
Lifespan Expiry Date:	12 Jun 2022		
Owner ID Type:	Company		

PREMIER AUTOMOTIVE SERVICES PTE LTD**23 Changi South Ave 2****#01-02, Singapore 486443****Assessment Number: MSIG0038****Version: PREMIERA/1****Assessor Report****Printed: 05/09/2018****Summary Information****Claim**

Claim Reference:	SHC6033E	Insured:	
Policy Number:		Third Party:	
Date of Decision:	05/09/2018	Able to Authorise Repairs:	TBA
Repairer:		Repairs Authorised?	TBA
Estimated Repair Time (Working Days):	0.0		

Insured's Liability

Excess:	TBA
Customer Contribution:	\$0.00 (excl GST)

Vehicle Details**Vehicle**

Registration:	SHC6033E	VIN/Chassis Number:	
Manufacturer:	KIA	Model:	Optima
Registration Month:	June	Registration Year:	2014
Odometer:	Not Known	Colour:	
Build Date:			
Model Specs	FROM 01/2014 PREPARE OFF VEHICLE BASECOAT CLEAR		

Vehicle Condition**Vehicle Status**

Date of Incident:	31/08/2018	Market Value:	Unknown
Pre-Accident Condition:		Salvage Value:	Unknown
Pre-Accident Damage:		Date of Inspection:	05/09/2018
Steering Rim Ply:		Place of Inspection:	
Brake Pedal Travel:			
Vehicle Status:			
Damage Severity:			

Tyres Condition:

Tread Depth LHF:
Tread Depth LHR:

Tread Depth RHF:
Tread Depth RHR:

Repair Information**LABOUR**

Time Basis 10 WU = 1 HR. Price/CL 1 = \$50.00/HR
Price/Dent = \$50.00/HR

Repair /**Guide Number Repair Details**

	WU	Cost Price (\$)
86520R00 RENEW REAR BUMPER (REMOVED)	11.0	55.00
86630R00) R + R REAR BUMPER CARRIER	4.0	20.00
2711 REPAIR REAR PANEL	20.0*	100.00

LABOUR COST**Total Work Units****Corrosion Protection External Labour****Corrosion Protection Internal Labour****Sub Total****Paint Labour**

35.0	
0.0HRS	0.00
0.0HRS	0.00
3.5HRS	\$175.00
5.6HRS	\$280.00

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 Changi South Ave 2

#01-02, Singapore 486443

Assessment Number: MSIG0038

Version: PREMIERA/1

Assessor Report

Printed: 05/09/2018

Total Labour

9.1HRS

\$455.00

PAINT WORK

Time Basis 10 WU = 1 HR. Price = \$50.00/HR

Guide Number	Description	WU	Cost Price (\$)
	- PREPARE OFF VEHICLE		
	- BASECOAT CLEAR		
2583	REAR BUMPER NEW PART PAINT K1R	14.0	
2711	REAR PANEL REPAIR PAINTING <50%	12.0	
LABOUR COST - PAINT			
	TIME(PAINT)	26.0	
	Preparation Main Work Plastic	5.0	
	Preparation Main Work Metal	25.0	
	Preparation Work Multi Layer Paint	0.0	
	Total Work Units (10WU/HR)	56.0	
	Total Paintwork Labour	5.6HRS	\$280.00
MATERIAL COST - PAINT			
	New Part Painting - Plastic K1R		\$70.36
	Material-Constant Main Work Metal		\$28.60
	Repair Painting		\$15.83
	Material-Const Main Work Plastic		\$9.00
	Total Excluding Pearlescent Uplift		\$123.79
	Pearlescent Uplift @ 0.0%		\$0.00
	Total Paint Material Cost		\$123.79

PARTS

Guide No.	Qty	Description	Part Number	Supplier	Bet.	Price (\$)
2617	1	L/R BUMPER BRACKET	866132T501	✓ Con	0%	29.00*
2618	1	R/R BUMPER BRACKET	866142T501	✓ Con	0%	29.00*
2583	1	REAR BUMPER	866112T500	✓ Secondhand	0%	696.00*
2644	1	REAR BUMPER DAMPER	866202T500	✓ Con	0%	116.00*
2770	1	REAR BUMPER SPOILER	866122T500	✓ Con	0%	206.00*
2640	1	REAR BUMPER SUPPORT	866312T500	✓ Con	0%	607.00*
f: OEM Parts		Sub Total				\$1,683.00
g: Original		Deduction from RRP (35 %)				-\$589.05
h: Secondhand		Total Parts				\$1,093.95
p: Parallel						
x: Exchange						

Price Valid: 01/06/2015

NB - COLOUR CODED ITEMS/TRIM - PART NUMBERS MAY DIFFER

Extras

Description	Betterment	Price
REVERSE SENSOR SPECIALIST	0% X sue	\$280.00
REAR BUMPER CLIPS SPECIALIST		\$48.00
Total Extras		\$328.00

Final Calculation

Total Parts	\$1,093.95
Labour	
Total Panel/Mechanical	\$175.00
Total Paintwork	\$280.00
Total Labour	\$455.00

PREMIER AUTOMOTIVE SERVICES PTE LTD

23 Changi South Ave 2

#01-02, Singapore 486443

Assessment Number: MSIG0038

Version: PREMIERA/1

Assessor Report

Printed: 05/09/2018

Additional Costs

Corr Prot Materials External	\$0.00
Corr Prot Materials Internal	\$0.00
Cost of Specialist	\$328.00

Total of Additional Costs

\$328.00

Total Paint/Material Costs

\$123.79

Grand Total Excludes GST

\$2,000.74

GST @ 7 %

\$140.05

Grand Total Includes GST

\$2,140.79

Assessment Notes

1 Car 1 (16k)

[Signature]
7/9/18

5/9/18 1005h
3 Days

4/5

Attn Repairer

- 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 "no prejudice" basis
 - No illegal modifications is allowed
 - Supplementary work(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer:

Signature:

Date:

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

Claim Reference: SHC6033E
Assessment Number: MSIG0038
Version: LKKAUTOC/2
Date Calculated: 07/09/2018 07:55

Full Report - V1
Registration: SHC6033E
Printed: 14/09/2018 09:02

Summary Information

Claim

Location:	Singapore (SG)	Currency:	SGD
Printed by:	LKK AUTO	Date of Incident:	31/08/2018
Authorisation Status:	Interim	Able to Authorise Repairs:	TBA
Work Provider:	MSIG Insurance (Singapore) Pte	Repairs Authorised:	TBA
Claim Reference:	SHC6033E	Estimated Repair Time:	
Policy Number:		Quote Due Date:	
Other Reference:		Actual Repair Days:	
Third Party:		Parts Ordered Date:	
Insured Amount:		Hire Car Start:	
Under Warranty:		Hire Car End:	
Warranty Expired:		Vehicle Collected:	

Vehicle Details

Vehicle

Manufacturer:	KIA
Model:	Optima
Sub Model:	BASE MODEL
Model Sheet Number:	2836 01
Registration:	SHC6033E
Registration Month:	June
Registration Year:	2014
VIN Number:	
Odometer:	Not Known
Colour:	
Engine Number:	
Fuel Level:	%

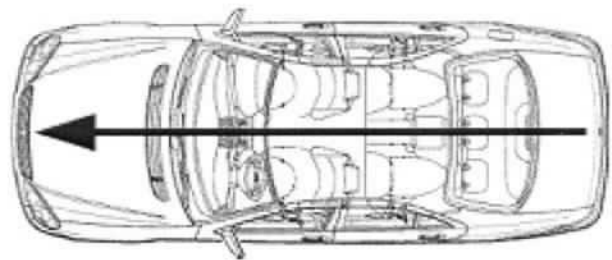
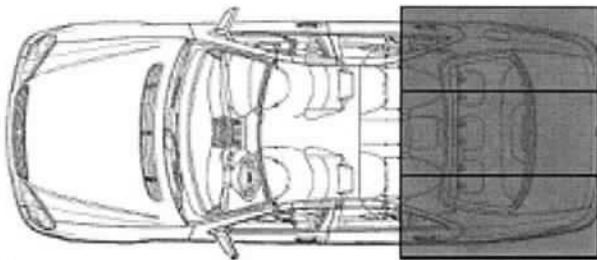
Model Specs

FROM 01/2014	PREPARE OFF VEHICLE
BASECOAT CLEAR	

Vehicle Condition

Vehicle Status

Pre-Accident Condition:	Severity of Impact:	
Steering:	Vehicle Status on Inspection:	
Brakes Pedal Travel:	Date of Inspection:	05/09/2018
Place of Inspection:		
Pre-Accident Damage:		
Tyres Condition:	Tread Depth RHF:	
Tread Depth LHF:	Tread Depth RHR:	
Tread Depth LHR:	Direction of Impact:	
Damage Areas:		



Addresses

Cost Summary

Total Labour	\$455.00
Total Paint/Material	\$123.79
Total Parts	\$1,093.95
Total of Additional Costs	\$48.00
Excess:	TBA
Grand Total Exc GST:	\$1,720.74
7 % GST:	\$120.45
Grand Total Inc GST:	\$1,841.19

Repair Information

LABOUR

Time Basis 10 WU = 1 HR. Price/CL 1 = \$50.00/HR
Price/Dent = \$50.00/HR

Repair /

Guide Number Repair Details

		WU	Cost Price (\$)
86520R00	RENEW REAR BUMPER (REMOVED)	11.0	55.00
86630R00)	R + R REAR BUMPER CARRIER	4.0	20.00
2711	REPAIR REAR PANEL	20.0*	100.00

LABOUR COST

Total Work Units	35.0	
Corrosion Protection External Labour	0.0HRS	0.00
Corrosion Protection Internal Labour	0.0HRS	0.00
Sub Total	3.5HRS	\$175.00
Paint Labour	5.6HRS	\$280.00
Total Labour	9.1HRS	\$455.00

PAINT WORK

Time Basis 10 WU = 1 HR. Price = \$50.00/HR

Guide Number Description

		WU	Cost Price (\$)
	- PREPARE OFF VEHICLE		
	- BASECOAT CLEAR		
2583	REAR BUMPER NEW PART PAINT K1R	14.0	
2711	REAR PANEL REPAIR PAINTING <50%	12.0	

LABOUR COST - PAINT

TIME(PAINT)	26.0	
Preparation Main Work Plastic	5.0	
Preparation Main Work Metal	25.0	
Preparation Work Multi Layer Paint	0.0	
Total Work Units (10WU/HR)	56.0	
Total Paintwork Labour	5.6HRS	\$280.00

MATERIAL COST - PAINT

New Part Painting - Plastic K1R	\$70.36
Material-Constant Main Work Metal	\$28.60

Repair Painting	\$15.83
Material-Const Main Work Plastic	\$9.00
Total Excluding Pearlescent Uplift	\$123.79
Pearlescent Uplift @ 0.0%	\$0.00
Total Paint Material Cost	\$123.79

PARTS

				Price Valid: 01/06/2015	
Guide No.	Qty	Description	Part Number	Supplier	Bet. Price (\$)
2617	1	L/R BUMPER BRACKET	866132T501		0% 29.00*
2618	1	R/R BUMPER BRACKET	866142T501		0% 29.00*
2583	1	REAR BUMPER	866112T500		0% 696.00*
2644	1	REAR BUMPER DAMPER	866202T500		0% 116.00*
2770	1	REAR BUMPER SPOILER	866122T500		0% 206.00*
2640	1	REAR BUMPER SUPPORT	866312T500		0% 607.00*
f: OEM Parts			Sub Total		\$1,683.00
g: Original			Deduction from RRP (35 %)		-\$589.05
h: Secondhand			Total Parts		\$1,093.95
p: Parallel					
x: Exchange					

NB - COLOUR CODED ITEMS/TRIM - PART NUMBERS MAY DIFFER

Extras

Description	Betterment	Price
REAR BUMPER CLIPS SPECIALIST	0%	\$48.00
Total Extras		\$48.00

Final Calculation

Total Parts	\$1,093.95
Labour	
Total Panel/Mechanical	\$175.00
Total Paintwork	\$280.00
Total Labour	\$455.00
Additional Costs	
Corr Prot Materials External	\$0.00
Corr Prot Materials Internal	\$0.00
Cost of Specialist	\$48.00
Total of Additional Costs	\$48.00
Total Paint/Material Costs	\$123.79
Grand Total Excludes GST	\$1,720.74
GST @ 7 %	\$120.45
Grand Total Includes GST	\$1,841.19

Assessment Notes

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	03 Sep 2018		04 Sep 2018 15:59 Edit Adj Rpt	S\$1,350.00 Edit Estimates	S\$1,350.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	Mohamed Sa'at bin Abdul, Rahman , ID: S1431063J								
Main Claimant:	PREMIER TAXIS PTE LTD , Co. Reg. No.: 200304975H								
Vehicle Reg. No.:	SHC6033E	Date of Loss:	31/08/2018 17:00 - :59 [50 Months and 18 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 569247	Policy/Cover Note No.:	B27435702SMP (Comprehensive) Coverage: 30/11/2017 - 29/11/2018						
Vehicle Reg. No. (Insured):	SGU7348H	Policy No. (Claimant):							
		Excess:							
Repairer:	Premier Taxis Pte Ltd - Changi (HQ) 23 Changi South Ave 2 #03-02, 486443 Changi - Tel:								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Monica Chung Pei Zhen - 6594 2552]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 04/10/2018]								
Driver/Custodian (Insured):	FAEZAH BINTE MOHAMED SA'AT (29 / Female), NRIC: S8851743A								
Adj Asg. Remarks:	SJE AGREE LKK. Liab-100%. Contact: 65446676 / 65446689								
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

*SHC6033E (569247)
[SGU7348H]
TP
PREMIER TAXIS PTE LTD
Aug 31 2018 5:00PM
[Mohamed Sa'at bin Abdul, Rahman]
Premier Taxis Pte Ltd - Changi

[Upload Documents](#)
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View View in Browser

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail		Print
1	07/09/18 15:09	Adjuster Immediate Advice	Load HTM		

Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail		Print
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4	05/09/18 17:26	General View	Load JPG		<input checked="" type="checkbox"/>
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24	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>
25	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>
26	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>
27	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>
28	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>
29	14/09/18 09:15	Reinspection Photo	Load JPG		<input checked="" type="checkbox"/>

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail		Print
1	04/09/18 15:15	SJE AGREE LKK	Load PDF		
2	04/09/18 15:15	Third Party Accident Report	Load PDF		
3	06/09/18 09:46	estimate repair	Load PDF		

Assessment Reports			1 per page	<input checked="" type="checkbox"/>
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No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail Print
1	14/09/18 10:31	AUTODAX		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)

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/MSG18016142/K1SBE2

Date: 17/09/2018

REFERENCE

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

Policy No: B27435702SMP

Claimant Vehicle No : SHC6033E

Insured Vehicle No : SGU7348H

Date of Loss: 31/08/2018

Nature of Claim: TP

Claim No: 569247

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHC6033E

Make & Model: KIA OPTIMA, 1.7 D (A)

Engine No: D4FDDH309735

Reg. Date: 13/06/2014 (Man. Year: 2013)

Chassis No: KNAGM414ME5463514

Colour: Silver

Odometer: 478930 km

Engine Capacity: 1685 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:	205/65 R16	Rear Tyre Size:	205/65 R16
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	1,421.95	1,141.95	280.00	19.69
Miscellaneous Items	0.00	0.00	0.00	
Labour	578.79	578.79	0.00	0.00
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,000.74	1,720.74	280.00	13.99
Approved Total (Overridden) (S\$)		1,350.00		
(S\$)	2,000.74	1,350.00	650.74	32.52
+ GST 7.00/7.00% (S\$)	140.05	94.50	45.55	32.52
Nett Amount (S\$)	2,140.79	1,444.50	696.29	32.52

INSPECTION

Date of Assignment: 04/09/2018

Date Inspected: 05/09/2018 Inspected At:

Premier Taxis Pte Ltd - Changi (HQ)
23 Changi South Ave 2 #03-02
Singapore 486443

Estimated Period of Repair: 3.0 days

Adjuster: KALVIN ANG WEI KUN

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: 17 Sep 2018)
Parts:	143	KIA OPTIMA 1.7 D (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHC6033E)	
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		*L/R BUMPER BRACKET	Cracked	29.00 FL	*29.00 FL
2	1		*R/R BUMPER BRACKET	Cracked	29.00 FL	*29.00 FL
3	1		*REAR BUMPER	Deformed	696.00 FL	*696.00 FL
4	1		*REAR BUMPER DAMPER	Torn	116.00 FL	*116.00 FL
5	1		*REAR BUMPER SPOILER	Cut	206.00 FL	*206.00 FL
6	1		*REAR BUMPER SUPPORT	Cracked	607.00 FL	*607.00 FL
7	1		*REVERSE SENSOR	Serviceable	280.00 FS	*- FS
8	1		*REAR BUMPER CLIPS	Necessary	48.00 FS	*48.00 FS
Sub Total (S\$)					2,011.00	1,731.00
- List Item Discount on L Items 35.00/35.00% (S\$)					589.05	589.05
Total Parts (S\$)					1,421.95	1,141.95

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

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	TOTAL PANEL / MECHANICAL	New	175.00	175.00
2	TOTAL PAINTWORK	New	280.00	280.00
3	TOTAL PAINT / MATERIAL COSTS	New	123.79	123.79
Gross Labour Cost (\$\$)			578.79	578.79

Report was unsubmitted during this print-out.

< END OF ESTIMATES >