

ASS. REC. BY:

REF: CS/CTI18016267/Dsd3^{nt}

Special Instruction:

Surveyor:

Bryan

ASSIGNMENT (Office)

Menimen

From (Person):

Jawyn Tay

of

CTI

Date/Time: 6/9/18 @ 9:40am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHA 2933U

Insured:

SLB 5539C

at Workshop m/s

SUON Hock Motor

Tel:

6483 6016

of

Blk 10, AMK Ind. Park 2A # 01-05/06

Policy No:

DMPCSN 3024641800

Claim No:

SNM18D04260C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

01/09/2018

CA / REV / REP. / REV 24 HRS

'up'

Insp: Chunni Motor

H.O.D. Endorsement:

Date/Time:

11:31am @ 6/9/18

Person Contacted:

William

Vehicle ☒ IN ☐ OUT

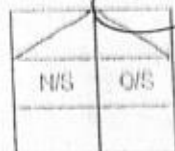
Date/Time	Action/Instruction (✓) Estimate
	SHA 2933U - CC4/III18016223/Tle b3q2 DOA: 23/8/16
	SLB 5539C - CC6/AIG1602374/Kpb 3q2 DOA: 6/12/16

REF:

ASSIGNMENT

COE 2023 Hw

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / RMV / MV
 Insured Vehicle No: _____
 at Work Location: _____
 of: _____
 Insured: _____
 Policy No: _____
 Claim 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 Report Consistent? : Yes or No

GIA / PR Seen Consistent? : Yes or No

Est. Repairs: 7 days Res.: Yes or No

Lump Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: 8HA 2933U Yr Equip: Nov / 2015
 Type: Car / M/Cycle / Bus / Van / Lorry / Truck / Prime Mover /
 Truck / Trailer or
 Make: Hyundai I40 CC: 1685
 Color: Blue AN: Insured / Std / HI / HA
 Sp Reading: 390444 TRadio: Insured / Std / TR / HA
 Eng No: D4FD Fu 562233
 CHo: KMHLB41UMGU080508
 Gen Cond: Good / Fair / Poor / Burnt
 Steering: Ins / J / Jammed / Leaked / Burnt or
 Brake: Ins / J / Jammed / Leaked / Burnt or
 Mod: 6 SRim / STD A/Rim or
 Tyre Size: F: 205/60 R16
 R: ————

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Westlake

Front Rear
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 01/09/2018 D.O.I. 06/09/2018
 Survey held at Chunni AMK

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

Frt O/S

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

Date / Time Action / Instruction

China Taipei

16/10/18 Jmmn H/S 6950/- with 7 days of rev
 16/10/18 Confirmed H/S \$6,950/- @ 7 days with Bryan.
 (\$4,226.88 Red - 38%)

RECEIVED 16 OCT 2018

Date/Time, File Name to?

16/10/18

1) 2pist

Date/Time, File Name to?

2)



Days Of Repair: 7

Resurvey No. of Trip: 2

Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Invs (\$)☐ Weekend (\$)

Survey Fee

Transportation

) \$ + PR, 24

) Photos

) Others

220

Report Format :

Lump Sum / L.B.A. (\$) 6,950/- H/S



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			
CHINA TAIPING INSURANCE (S) PTE LTD		Ref : CS/CTI18016267/Dsd3	
3 ANSON ROAD #16-00 SPRINGLEAF TOWERS SINGAPORE 079909		Date : 06-09-2018	
		Code : CTI	
1. Policy Particulars :- THIRD PARTY CLAIM			
Insured Veh.	SLB 5539C	Veh. Inspected	SHA 2933U
Policy No.	DMPCSN3024641800	Coverage (\$)	0.00
Claim No.	SNM18D04260C02	Excess (\$)	0.00
Assign From	MERIMEN (JOWYN TAY)	Assign Date	06/09/2018
2. Vehicle Particulars & Condition			
Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm
4. Description of Damages			
5. General Information			
Accident Date	01/09/2018	Inspection Date	06/09/2018
Survey held at	CHUNNI MOTOR-BLK 10 ANG MO KIO IND. PARK 2A#01-05		
Repairer	SOON HOCK MOTOR PTE LTD		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	06 Sep 2018		06 Sep 2018 09:40 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	PEH HOCK SENG, ID: S1254513D		
Main Claimant:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R		
Vehicle Reg. No.:	SHA2933U	Date of Loss:	01/09/2018 22:00 - :59
Claim Type:	TP / SNM18D04260C02	Policy/Cover Note No.:	DMPCSN3024641800 Coverage: 13/04/2018 - 12/04/2019
Vehicle Reg. No. (Insured):	SLB5539C	Policy No. (Claimant):	MCOM0015
		Excess:	S\$0.00
Repairer:	Soon Hock Motor Pte Ltd (HQ) Blk 10 Ang Mo Kio Industrial Park 2A, #01-05/06 AMK Autopoint, 568047 Ang Mo Kio - Tel: 64836016		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Jowyn Tay - 6389 6174]		
Claimant's Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 17/09/2018]		
Adj Asg. Remarks:	PLEASE PROCEED TO SURVEY ON WITHOUT PREJUDICE BASIS.		

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.									

MCD618113575 / ComfortDelGro Engineering Pte Ltd - Loyal
ENTRY DATE & TIME: 03/09/2018 07:20
SUBMITTED BY: Catherine Por May Juan

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 07:20
Date Of Accident	01/09/2018 22:00
Exact Location Of Accident	YISHUN RING ROAD.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA2933U
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I40
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	MICHAEL TOH YONG SENG (ZHUO RONG SHENG)
NRIC No	S1729468G
Date Of Birth	08/10/1965
Occupation	OUTDOOR
Date Of Driving Pass	07/01/1986
Driving Experience	32 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94562450
Fax Number	
Contact Number	
Email Address	TOHMICHAELYS@GMAIL.COM

Address	794 #08-3458 YISHUN RING ROAD
Postcode	760794
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD ON 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	
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 [OTHER]	TAMPINES NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB5539C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PEH HOCK SENG
NRIC/Passport Number	S1254513D
Contact Number	93848458
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	MICHAEL TOH YONG SENG (ZHUO RONG SHENG)
Approximate Age	53
Injuries Sustain	NECK,BACK,HANDS
Injured person in which vehicle?	SHA2933U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD
CO REG. NO. 199303821R

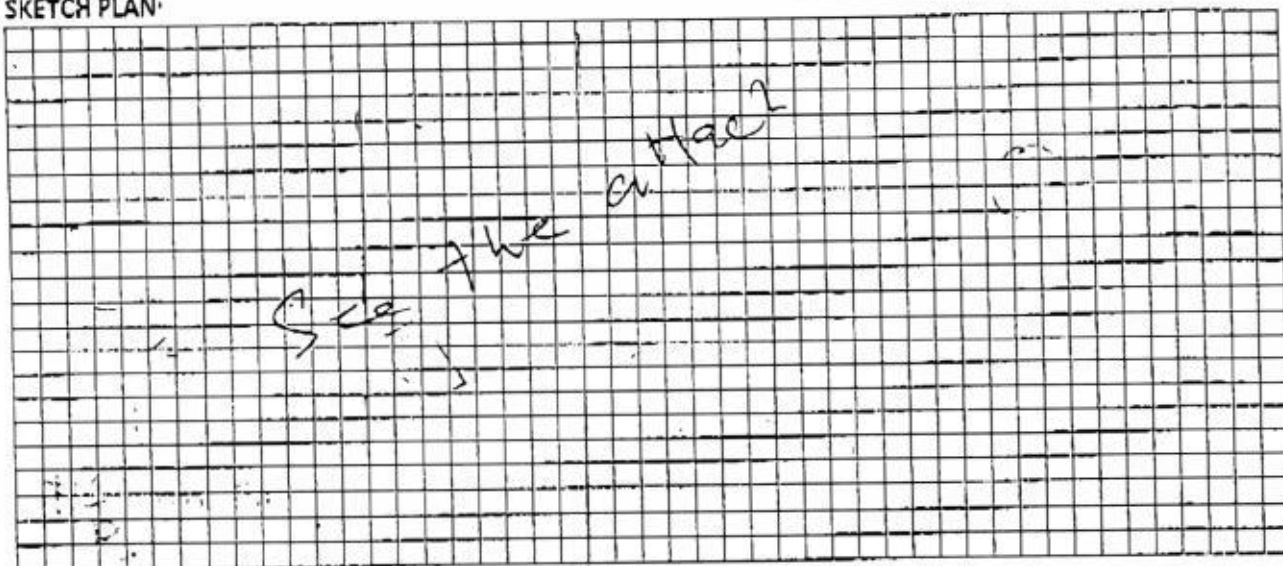
Policyholder's Signature
Date & Time:

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

2/9/18
Jackson Hong
CSO

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer : Police Report attach T/20180902/2027

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

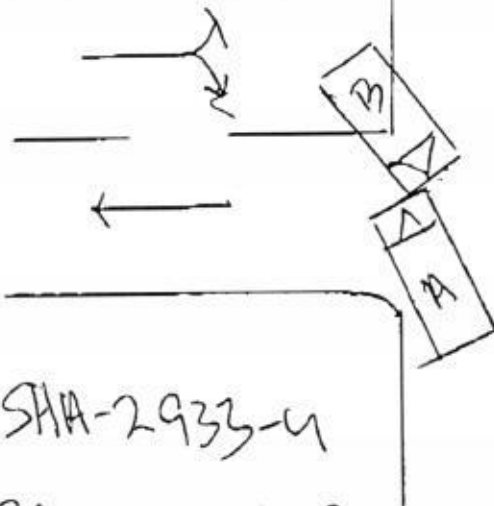
2/9/18
Jackson Heng
CSO

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

ADB - SVC RD

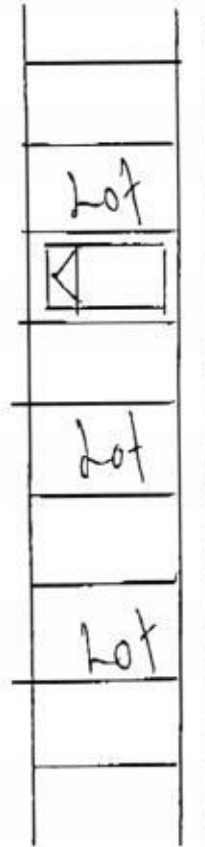
31K 787

Yishun Ring Rd



A-SHA-2933-4

B-SLB-5539-C





SINGAPORE POLICE FORCE



T/20180902/2027

1 of 3

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Report No. J/20180902/2027

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/09/2018 11:18		Vide Report No.:		Station Diary No.: 27	
Informant's Particulars					
Name of Informant: MICHAEL TOH YONG SENG			Address: APT BLK 128B CANBERRA STREET #10-528 SINGAPORE 752128		
ID Type / ID No.: NRIC NO / S1729468G			Contact No.: Home/Office:		Mobile: 94562450
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 52	Date of Birth: 08/10/1965	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3,4		Date of Expiry:

General Information of the Accident					
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 01/09/2018 22:00	Type of Location: Car Park	
Location: Along Road 1 YISHUN RING ROAD					
CARPARK VICINITY ALONG YISHUN RING RD NEAR BLOCK 787					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHA2933U	Car	HYUNDAI		Blue	Slightly Damaged	0
SLB5539C	Car	TOYOTA		White	Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180902/2027

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

2 of 3

Report No. T/20180902/2027

CONTINUATION OF REPORT

Driver			
Name	MICHAEL TOH YONG SENG	ID No.	S1729468G
Related Vehicle	SHA2933U (Car)	Contact No.	94562450
Hospital/Clinic	ANSAR CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	02/09/2018	Date Discharge	02/09/2018
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	PEH HOCK SENG	ID No.	S1254513D
Related Vehicle	SLB5539C (Car)	Contact No.	93848458
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 above mentioned date, time and location, I was driving my vehicle, SHA2933U, along the carpark beside B/787 Yishun Ring Rd and was about to make a left turn. While making the left turn, there was another vehicle, SLB5539C, whom wanted to make a right turn to where I was at. He did not stop at the stop line and then collided to the front right portion of my vehicle. We then went out of our vehicle to exchange particulars and take pictures of the accident. Damages to my vehicle are dents and scratches to the front right bumper and cracked front grill. I then went to Ansar clinic and received 3 days of mc dated from the 02/09/18 till 04/09/18. Injuries are neck and back sprain and numbness on hands. I have an in built car camera in my vehicle which captured the incident. There was no traffic police or ambulance at scene.



**SINGAPORE
POLICE FORCE**



T/20180902/2027

3 of 3

Report No. T/20180902/2027

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

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:

G /

Sgt 2 ABDUL RAHMAN BIN MOHAMED ALI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/09/2018 11:18

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:



SINGAPORE
POLICE FORCE

Authentication Stamp

NP168

SIGNATURE

CHUNNI MOTOR WORK PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SHA 2933U

MAKE :

MODEL : HYUNDAI i40

LKK Auto Consultants hence notify
the Repairer DATE: 3.09.2018
• To resurvey before/after spray painting
• To display damaged part(s) during repair
• Parts prices are FAX to: 6542 5119
China Taiping

Qty	Parts Description/ Labour	Type	Unit Price	Amount	
	Bonnet Lock <i>1st</i>			\$ 36.90	✓
	Radiator Grille <i>broken</i>			\$ 1,110.10	✓
	Radiator Grille H Emblem <i>new</i>			\$ 39.50	✓
	Front Bumper Cover <i>crack</i>			\$ 1,052.20	✓
	Front Bumper Sponge <i>to 1/2</i>			\$ 99.20	✓
	Front Bumper Reinforcement <i>2 1st</i>			\$ 402.10	✓
	Front Bumper Lip <i>new</i>			\$ 54.90	X
	Front Bumper Bracket Top (LH/RH) <i>new</i>	S	22.40	\$ 44.80	X
	Front Bumper Bracket (LH/RH) <i>new</i>	S	24.60	\$ 49.20	X
	Headlamp Support Top Cover <i>3/4</i>			\$ 222.60	X
	Headlamp Support Panel Assy <i>2 crack</i>			\$ 907.40	✓
	Headlamp (LH/RH) <i>o/s broken n/s new crack minor</i>		1,388.00	\$ 2,776.00	✓
	Radiator <i>2 1st</i>			\$ 698.30	✓
	Radiator Fan Blade, Cowling, Motor Assy <i>new crack</i>			\$ 792.95	X
	Radiator Bracket (RH/LH) <i>3/4</i>	S	6.50	\$ 13.00	X
	Radiator Guard <i>2 new</i>	S	20.00	\$ 40.00	X
	Horn Unit (LH/RH) <i>new</i>	S	73.80	\$ 147.60	X
	Front Fender (RH) <i>Painted</i>			\$ 566.30	✓
	Front Fender Shield (RH) <i>new</i>			\$ 175.90	X
	Aircon Condenser <i>2 1st</i>			\$ 927.50	✓
	Inter Cooler <i>2 new</i>			\$ 1,032.50	X
	Inter Cooler Mounting (2 PCS) <i>new</i>			\$ 25.90	X
			9408.45		
			7526.04		
			7526.76		
	SUB TOTAL			\$ 11,214.85	
	LESS 20%			\$ 2,242.97	
	DISCOUNTED TOTAL			\$ 8,971.88	
	Front Number Plate <i>dislodged</i>			\$ 25.00	Nett ✓
	Front No Plate Trim Cover <i>cut</i>			\$ 30.00	Nett ✓
	Front Fender Advertisement Logo (RH) <i>new</i>			\$ 100.00	Nett ✓
			155.00		
				\$ 155.00	
	Labour Charge			\$ 1,000.00	500/-
	Panel Beating			\$ 750.00	400/-
	Spray Painting Charge			\$ 50.00	30/-
	Wiring Charge			\$ 50.00	20/-
	Tuff Kote			\$ 50.00	new
	Towing Charge			\$ 150.00	480/-
	Remove/Refix Aircon & Refill Gas				
			1030.00		
	TOTAL LABOUR			\$ 2,050.00	
			8711.76		
	ESTIMATE TOTAL			\$ 11,176.88	

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

4569501-

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/CTI18016267/DSD3N2

Date: 19/10/2018

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3024641800
Claimant Vehicle No :	SHA2933U	Insured Vehicle No :	SLB5539C
Date of Loss:	01/09/2018	Nature of Claim:	TP
		Claim No:	SNM18D04260C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SHA2933U	Engine No:	D4FDFU562233
Make & Model:	HYUNDAI I40, 1.7 D (A)	Chassis No:	KMHLB41UMGU080508
Reg. Date:	19/11/2015 (Man. Year: 2015)	Odometer:	390444 km
Colour:	Blue		
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:	205/60R16	Rear Tyre Size:	205/60R16
Front Left Side:	West Lake 6 mm	Rear Left Side:	West Lake 6 mm
Front Right Side:	West Lake 6 mm	Rear Right Side:	West Lake 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	9,126.88	7,681.76	1,445.12	15.83
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,050.00	1,030.00	1,020.00	49.76
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	11,176.88	8,711.76	2,465.12	22.06
Approved Total (Overridden) (S\$)		6,950.00		
(S\$)	11,176.88	6,950.00	4,226.88	37.82
+ GST 7.00/7.00% (S\$)	782.38	486.50	295.88	37.82
Nett Amount (S\$)	11,959.26	7,436.50	4,522.76	37.82

INSPECTION

Date of Assignment: 06/09/2018

Date Inspected: 06/09/2018 Inspected At:

Soon Hock Motor Pte Ltd (HQ)
Blk 10 Ang Mo Kio Industrial Park 2A,
#01-05/06 AMK Autopoint
Singapore 568047

Estimated Period of Repair: 7.0 days

Adjuster: BRYAN TANI

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: 19 Oct 2018)
Parts: 143	HYUNDAI I40 1.7 D (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SHA2933U)	
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		*BONNET LOCK	Bent	36.90 FL	*36.90 FL
2	1		*RADIATOR GRILLE	Broken	1,110.10 FL	*1,110.10 FL
3	1		*RADIATOR GRILLE H EMBLEM	Necessary	39.50 FL	*39.50 FL
4	1		*FRONT BUMPER COVER	Cracked	1,052.20 FL	*1,052.20 FL
5	1		*FRONT BUMPER SPONGE	Torn	99.20 FL	*99.20 FL
6	1		*FRONT BUMPER REINFORCEMENT	Bent	402.10 FL	*402.10 FL
7	1		*FRONT BUMPER LIP	Not Necessary	54.90 FL	*- FL
8	2		*FRONT BUMPER BRACKET TOP (LH/RH)	Not Necessary	44.80 FL	*- FL
9	2		*FRONT BUMPER BRACKET (LH/RH)	Not Necessary	49.20 FL	*- FL
10	1		*HEADLAMP SUPPORT TOP COVER	Serviceable	222.60 FL	*- FL
11	1		*HEADLAMP SUPPORT PANEL ASSY	Cracked	907.40 FL	*907.40 FL
12	2		*HEADLAMP (LH/RH)	Os Broken/Ns Mounting Cracked	2,776.00 FL	*2,776.00 FL
13	1		*RADIATOR	Bent	698.30 FL	*698.30 FL
14	1		*RADIATOR FAN BLADE,COWLING,MOTOR ASSY	Cracked	792.95 FL	*792.95 FL
15	2		*RADIATOR BRACKET (RH/LH)	Serviceable	13.00 FL	*- FL
16	2		*RADIATOR GUARD	Not Necessary	40.00 FL	*- FL
17	2		*HORN UNIT (LH/RH)	Not Necessary	147.60 FL	*- FL
18	1		*FRONT FENDER (RH)	Dented	566.30 FL	*566.30 FL
19	1		*FRONT FENDER SHIELD (RH)	Not Necessary	175.90 FL	*- FL
20	1		*AIRCON CONDENSER	Bent	927.50 FL	*927.50 FL
21	1		*INTER COOLER	Not Necessary	1,032.50 FL	*- FL
22	1		*INTER COOLER MOUNTING (2 PCS)	Not Necessary	25.90 FL	*- FL
23	1		*FRONT NUMBER PLATE	Dislodged	25.00 FS	*25.00 FS
24	1		*FRONT NO PLATE TRIM COVER	Cut	30.00 FS	*30.00 FS
25	1		*FRONT FENDER ADVERTISEMENT LOGO (RH)	Necessary	100.00 FS	*100.00 FS

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

Sub Total (\$\$)	11,369.85	9,563.45
- List Item Discount on L Items 20.00/20.00% (\$\$)	2,242.97	1,881.69
Total Parts (\$\$)	9,126.88	7,681.76

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Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Labour Items				
1	PANEL BEATING	New	1,000.00	500.00
2	SPRAY PAINTING CHARGE	New	750.00	400.00
3	WIRING CHARGE	New	50.00	30.00
4	TUFF KOTE	New	50.00	20.00
5	TOWING CHARGE	New	50.00	-
6	REMOVE/REFIX AIRCON & REFILL GAS	New	150.00	80.00
Gross Labour Cost (\$\$)			2,050.00	1,030.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >