

ASS. REC. BY:

REF: CS/CTL18016339 / 119692

Special Instruction:

SURVEYOR

## ASSIGNMENT (Office)

From (Person): Mermaid Teaine Cheong of CTL Date/Time: 14092018 3:23pm  
 Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

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

To Inspect Vehicle No: SHC 73061 Insured: YM 9338Cat Workshop m/s: Ding Automation Tel: 96992878of 31 Corporation RdPolicy No: DMCVSN 3077061700 Claim No: SNM18D 0444102

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 12092018

(Client's Record)

CA / REV / REP. / REV 24 HRS WPI 17092018 H.O.D. Endorsement: \_\_\_\_\_Date/Time: 14092018 3:39pm Person Contacted: Alex Vehicle IN / OUT

Date/Time	Action/Instruction ( ✓ ) Estimate
	<u>SHC 73061 - X</u>
	<u>YM 9338 C - NA / CTL18016759 / 24</u> <u>DOA: 12092018</u>
<u>24/9/18@</u>	<u>3:49pm confirmed with Michelle LS &amp; 7300, 3 days.</u>
	<u>Cred &amp; 1531.04, 40%</u>



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

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	14 Sep 2018		14 Sep 2018 15:23 Assign				<b>New Assignment</b> Cancel Case

Main	Reference	Claim Details	Documents	Show All
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## CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	M/S KIAN AIK CONSTRUCTION PTE LTD, Co. Reg. No.: 201110621H		
Main Claimant:	CITYCAB PTE LTD, Co. Reg. No.: 199502839G		
Vehicle Reg. No.:	SHC7306L	Date of Loss:	12/09/2018 15:00 - :59
Claim Type:	TP / SNM18D04441C02	Policy/Cover Note No.:	DMCVSN3077061700 (Comprehensive)
Vehicle Reg. No. (Insured):	YM9338C	Policy No. (Claimant):	D-18088937MFSH
		Excess:	S\$0.00
Repairer:	Ding Automotive Pte Ltd (HQ) 31 CORPORATION ROAD, 649825 Boon Lay - Tel: 96992878		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Elaine Cheong]		
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 25/09/2018]		
Driver/Custodian (Insured):	KARUBBIAH RAJAPANDIYAN (34 / Male), NRIC: G7489729R, Tel: +6583474276		
Adj Asg. Remarks:	NO EST, CASE WITH SJE.		

## ASSOCIATED MAIL RECEIVED

There are no mail for this case.

[View All](#)[Compose Case Mail](#)

## ALL ASSOCIATED TASKS

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

[View All](#)[Search Tasks](#)[Create New Task](#)[Complete](#)

## Shiau Chan (LKKAUTO)

---

**From:** Michelle <accounts@dingauto.sg>  
**Sent:** Monday, 24 September 2018 3:49 PM  
**To:** Shiau Chan (LKKAUTO); Taufikh (LKKAUTO); SUR  
**Cc:** ADMIN@DINGAUTOMOTIVE.COM.SG; Carlor.chan@dingauto.sg; CS A Team; Admin A  
**Subject:** Re: 50110947/SHC7306L - Finalize Amount & After Repair Photo

Dear Shiau Chan,

We confirm the finalize amount.

Thank you so much

Yours sincerely  
Michelle Fang  
92394128  
Ding Automotive Pte Ltd

On 24/9/2018 3:46 PM, Shiau Chan (LKKAUTO) wrote:

Dear Michelle,

WITHOUT PREJUDICE

Offer Lump Sum \$2,300.00 and 3 repair days.

Kindly confirm.

Best Regards,

**Shiau Chan (Ms)** | Case Handler  
**LKK Auto Consultants Pte Ltd**

Phone: 6256-3561 | email: [siewsc@lkkauto.com](mailto:siewsc@lkkauto.com) | fax: 6256-4315  
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

---

**From:** Michelle <accounts@dingauto.sg>  
**Sent:** Monday, 24 September 2018 11:51 AM  
**To:** Taufikh (LKKAUTO) <Taufikh@lkkauto.com>; SUR <sur@lkkauto.com>  
**Cc:** [taxiscs@stengg.com](mailto:taxiscs@stengg.com); ADMIN@DINGAUTOMOTIVE.COM.SG; Carlor.chan@dingauto.sg; Thin Thin (LKKAUTO) <thinthin@lkkauto.com>; Vivian Lau (LKKAUTO) <vivianlau@lkkauto.com>; Asher Sng (LKKAUTO) <AsherSng@lkkauto.com>; CS A Team <cs-a@lkkauto.com>; Admin A <admin-a@lkkauto.com>  
**Subject:** Re: 50110947/SHC7306L - Finalize Amount & After Repair Photo

Dear all,

Please advise the finalize amount for this case as we still have not receive any uodate from you till today.

Kindly check and update us as soon as possible.

Thank you so much

## 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	13/09/2018 09:34
Date Of Accident	12/09/2018 15:20
Exact Location Of Accident	JUNCTION OF DICKSON ROAD & UPPER WELD ROAD .
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC7306L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40-1.7 D CRDI (A)

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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	

### Driver

Name of Driver	ANG KIAN CHONG
NRIC No	S1395291D
Date Of Birth	01/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	11/08/1978
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96429343
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	APT BLK 207 JURONG EAST STREET 21 #04-231 SINGAPORE
Postcode	600207
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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: : UNKNOWN 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 ATTACH STATEMENT .

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE NOT SUITABLE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM9338C
Vehicle Make/Model/Colour	NISSAN CABSTAR
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	G032813720
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**SKETCH PLAN**

**IMPORTANT NOTICE**

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

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature  
Date & Time:

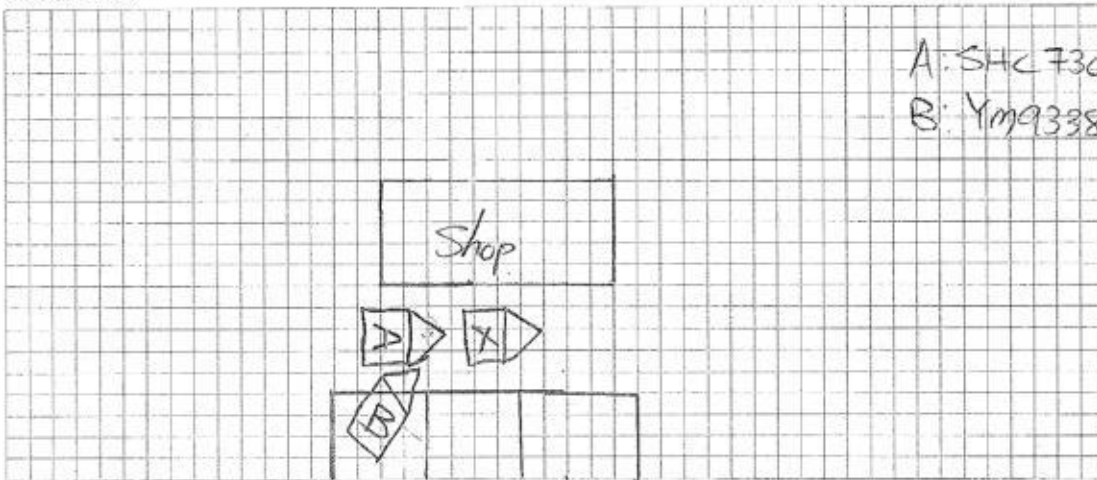
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



# Accident Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12-9-18 at about 15:20 HRS. I was travelling along Upper Weld road. With 1 passenger on board. I was driving on my lane. Suddenly the vehicle (B) came out of parking lot and hit onto my front right side portion.

## 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.:

**DING AUTOMOTIVE PTE LTD**  
 Blk 10 Sin Ming Industrial Estate Sector C  
 #01-20  
 Singapore 575645  
 Tel: 6452 1208 Fax: 6452 0614

TO :

FAX NO:

**ESTIMATE REPORT** 1ST Quotation

15/09/2018 14:59

**OWNER'S PARTICULARS**

JOB-NO: 50110947

NAME: CityCab PTE LTD (Fleet)  
 ADDRESS: 383 SIN MING DRIVE  
 SINGAPORE 575717 0

CONTACT: 65533880  
 64739522

Page 1 of 2

**VEHICLE DETAILS**

LICENSE NO: SHC7306L  
 MAKE / MODEL: HYUNDAI / i40  
 OWNER'S INSURER: MS First Capital Insurance Limited  
 JOB-CODE: TP

TRANS: AUTO  
 SA: Ding Auto User 2

CHASSIS: KMHLB41UMGU093593  
 ENGINE: D4FDGU671678

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	500.00	0.00	500.00		Y	300 ✓
2 R&R DOOR COMPONENTS & SIDE MIRROR	1.00	80.00	0.00	80.00		Y	60 ✓
3 RUST PROOFING	1.00	50.00	0.00	50.00		Y	20 ✓
4 SUNDRIES	1.00	50.00	0.00	50.00		Y	30 ✓
5 RESPRAY FRONT DOOR & REAR DOOR & SIDE MIRROR	1.00	600.00	0.00	600.00		Y	300 ✓
TOTAL:		1,280.00	0.00	1,280.00			
<b>MATERIALS</b>							
1 FRONT DOOR RHS	1.00	2,256.00	451.20	1,804.80	L	Y	66 ✓
2 FRONT DOOR HANDLE RHS	1.00	68.90	13.78	55.12	L	Y	44 ✓
3 FRONT DOOR UPPER HINGE RHS	1.00	46.50	9.30	37.20	L	Y	24 ✓
4 FRONT DOOR BOTTOM HINGE RHS	1.00	42.30	8.46	33.84	L	Y	24 ✓
5 FRONT DOOR POWER WINDOW REGULATORS RHS	1.00	350.10	70.02	280.08	L	Y	? x nn
6 FRONT DOOR ADS STICKER	1.00	180.00	0.00	180.00	S	Y	44 ✓
7 FRONT DOOR STICKER-CITYCAB	1.00	160.00	0.00	160.00	S	Y	44 ✓
TOTAL:		3,103.80	552.76	2,551.04			
TOTAL PARTS & LABOUR :		4,383.80	552.76	3,831.04			

EXCESS/LOADING:SS 0.00

No. Of Day: 3

RE-SURVEY: BEFORE/AFTER PAINTING  
 PART-BY-PART OR LUMP SUM: SS

DATE OF SURVEY: 12 / 9 / 18

SURVEYED BY: Tan Jiah

CONTACT NO: 92495749

FAX NO: \_\_\_\_\_

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

ESTIMATOR  
 STA AUTOCENTRE

**LKK Auto Consultants** hence notify  
 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
- Supplemental G-STAR-W-ET-001-02-Rev002 is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
TEL:							
FAX:							

# DING AUTOMOTIVE PTE LTD

Bik 10 Sin Ming Industrial Estate Sector C

#01-20

Singapore 575645

Tel: 6452 1208 Fax: 6452 0614

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

15/09/2018 14:59

JOB-NO: 50110947

## OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

## VEHICLE DETAILS

LICENSE NO: SHC7306L

TRANS: AUTO

CHASSIS: KMHLB41UMGU093593

MAKE / MODEL: HYUNDAI / I40

ENGINE: D4FDGU671678

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 2

## CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	500.00	0.00	500.00		Y	300
2 R&R DOOR COMPONENTS & SIDE MIRROR	1.00	80.00	0.00	80.00		Y	60
3 RUST PROOFING	1.00	50.00	0.00	50.00		Y	20
4 SUNDRIES	1.00	50.00	0.00	50.00		Y	30
5 RESPRAY FRONT DOOR & REAR DOOR & SIDE MIRROR	1.00	600.00	0.00	600.00		Y	300
TOTAL:		1,280.00	0.00	1,280.00			
<b>MATERIALS</b>							
1 FRONT DOOR RHS	1.00	2,256.00	451.20	1,804.80	L	Y	66
2 FRONT DOOR HANDLE RHS	1.00	68.90	13.78	55.12	L	Y	24
3 FRONT DOOR UPPER HINGE RHS	1.00	46.50	9.30	37.20	L	Y	24
4 FRONT DOOR BOTTOM HINGE RHS	1.00	42.30	8.46	33.84	L	Y	24
5 FRONT DOOR POWER WINDOW REGULATORS RHS	1.00	350.10	70.02	280.08	L	Y	?
6 FRONT DOOR ADS STICKER	1.00	180.00	0.00	180.00	S	Y	24
7 FRONT DOOR STICKER-CITYCAB	1.00	160.00	0.00	160.00	S	Y	24
TOTAL:		3,103.80	552.76	2,551.04			
TOTAL PARTS & LABOUR:		4,383.80	552.76	3,831.04			

EXCESS/LOADING: \$ 0.00

No. Of Day: 3

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM: \$

DATE OF SURVEY: 12 / 9 / 18

SURVEYED BY: Tan Jiah

CONTACT NO: 97495749

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

ESTIMATOR

STA AUTOCENTRE

Labour \$710  
S/A \$340

Parts \$2909.98-20% Lump Sum  
total \$2327.93

G-STAR-WI-ET-001-02-Rev00

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR,DISP	REV PRICE
TEL:							
FAX:							

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	14 Sep 2018		14 Sep 2018 15:23 <a href="#">Edit Adj Rpt</a>	<b>S\$2,300.00</b> <a href="#">Edit Estimates</a>	<b>S\$2,300.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	<b>M/S KIAN AIK CONSTRUCTION PTE LTD</b> , Co. Reg. No.: 201110621H		
Main Claimant:	<b>CITYCAB PTE LTD</b> , Co. Reg. No.: 199502839G		
Vehicle Reg. No.:	<b>SHC7306L</b>	Date of Loss:	12/09/2018 15:00 - :59 [24 Months and 18 Days From LTA Reg Date (Man Yr)]
Claim Type:	<b>TP / SNM18D04441C02</b>	Policy/Cover Note No.:	DMCVSN3077061700 (Comprehensive)
Vehicle Reg. No. (Insured):	<b>YM9338C</b>	Policy No. (Claimant):	D-18088937MFSH
		Excess:	S\$0.00
Repairer:	<b>Ding Automotive Pte Ltd (HQ)</b> 31 CORPORATION ROAD, 649825 Boon Lay - Tel: 96992878		
Handling Insurer:	<b>China Taiping Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: 6389 6111 ... [Handled by <b>Elaine Cheong</b> ]		
Claimant's Insurer:	<b>MS First Capital Insurance Ltd (HQ)</b> - Tel: 62222311		
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>MOHD TAUFIKH BIN HAMID</b> ] ... [Final Rpt due 25/09/2018]		
Driver/Custodian (Insured):	KARUBBIAH RAJAPANDIYAN (34 / Male), NRIC: G7489729R, Tel: +6583474276		
Adj Asg. Remarks:	NO EST, CASE WITH SJE.		

### 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







**\*SHC7306L (SNM18D04441C02)**  
**[YM9338C]**  
**TP**  
**CITYCAB PTE LTD**  
**Sep 12 2018 3:00PM**  
**[M/S KIAN AIK CONSTRUCTION PTE LTD]**  
**Ding Automotive Pte Ltd**

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

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





Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	Singapore Technologies Kinetics Ltd (Jalan Boon Lay)	Thumbnail	Print
1	13/09/18 09:44	<b>Accident Statement</b>	 Load HTM	

Photos/Images			3 per page	<input checked="" type="checkbox"/>
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No	Finalized On	Singapore Technologies Kinetics Ltd (Jalan Boon Lay)	Thumbnail	Print
1	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
2	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
3	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
4	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
5	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
6	13/09/18 09:42	<b>Accident Photo</b> [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>

No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	27/09/18 14:02	<b>Odometer Reading</b>	 Load JPG	<input checked="" type="checkbox"/>
2	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
3	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
4	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
5	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
6	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
7	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
8	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
9	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
10	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
11	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
12	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
13	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
14	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
15	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
16	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
17	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
18	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
19	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
20	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
21	27/09/18 14:02	<b>General View</b>	 Load JPG	<input checked="" type="checkbox"/>
22	27/09/18 14:02	<b>General View</b>	Load JPG	<input checked="" type="checkbox"/>
23	27/09/18 14:02	<b>Chassis Number</b>	Load JPG	<input checked="" type="checkbox"/>



Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On		Thumbnail	Print
		Singapore Technologies Kinetics Ltd (Jalan Boon Lay)		
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On		Thumbnail	Print
1	13/09/18 09:41	<b>Accident Sketch Plan</b> [Linked Accident Report Documents]	 Load TIF	
		China Taiping Insurance (Singapore) Pte. Ltd. (HQ)		
1	14/09/18 15:22	<b>PRS</b>	 Load PDF	
2	14/09/18 15:22	<b>TP GIA</b>	 Load PDF	
3	14/09/18 15:22	<b>OI GIA</b>	 Load PDF	

## Linked Accident Report Documents

Assessment Reports			View	View in Browser	<input checked="" type="checkbox"/>
No	Finalized On		Thumbnail	Print	
1	13/09/18 09:44	<b>Accident Statement</b>	 Load HTM		
Photos/Images			3 per page	<input checked="" type="checkbox"/>	
No	Finalized On		Thumbnail	Print	
1	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
2	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
3	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
4	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
5	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
6	13/09/18 09:42	<b>Accident Photo</b>	 Load JPG	<input checked="" type="checkbox"/>	
Documentation			1 per page	<input checked="" type="checkbox"/>	
No	Finalized On		Thumbnail	Print	
1	13/09/18 09:41	<b>Accident Sketch Plan</b>	 Load TIF		

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b> <span>Reset</span> <span>Save</span> <span>Print</span>
There are no document checklists configured.
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>
<b>Show Remarks To:</b> <input type="checkbox"/> 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/CT18016839/T1QBS2

Date: 04/10/2018

## REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMCVSN3077061700		
Claimant Vehicle No :	SHC7306L	Insured Vehicle No :	YM9338C		
Date of Loss:	12/09/2018	Nature of Claim:	TP	Claim No:	SNM18D04441C02

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No:	<b>SHC7306L</b>		Engine No:	D4FDGU671678
Make & Model:	HYUNDAI I40, 1.7 D CRDi (A)		Chassis No:	KMHLB41UMGU093593
Reg. Date:	25/08/2016 (Man. Year: 2016)		Odometer:	324192 km
Colour:	Yellow			
Engine Capacity:	1685 cc			
Market Value/New Car Price:	N/A			
Sum Insured (S\$):	<b>Market Value/New Car Price</b>			

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

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

## CONDITION OF TYRES

Front Tyre Size:	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	2,601.04	2,229.92	371.12	14.27
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,230.00	680.00	550.00	44.72
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>3,831.04</b>	<b>2,909.92</b>	<b>921.12</b>	<b>24.04</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>2,300.00</b>		
<b>(S\$)</b>	3,831.04	2,300.00	1,531.04	39.96
<b>+ GST 7.00/7.00% (S\$)</b>	268.17	161.00	107.17	39.96
<b>Nett Amount (S\$)</b>	<b>4,099.21</b>	<b>2,461.00</b>	<b>1,638.21</b>	<b>39.96</b>

## INSPECTION

Date of Assignment:	14/09/2018	
Date Inspected:	17/09/2018	Inspected At: Ding Automotive Pte Ltd (HQ) 31 CORPORATION ROAD Singapore 649825
Estimated Period of Repair:	3.0 days	

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: SHIAU CHAN

*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

<b>Part Source:</b>	MRM-SG	Version: 1.0 (Last Synchronised: 04 Oct 2018)
<b>Parts:</b>	143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHC7306L)	
<b>Validity:</b>	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
<b>Further Info:</b>	Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT DOOR RHS	Bent	2,256.00 FL	*2,256.00 FL
2	1		*FRONT DOOR HANDLE RHS	Cut	68.90 FL	*68.90 FL
3	1		*FRONT DOOR UPPER HINGE RHS	Repair	46.50 FL	*- FL
4	1		*FRONT DOOR BOTTOM HINGE RHS	Repair	42.30 FL	*- FL
5	1		*FRONT DOOR POWER WINDOW REGULATORS RHS	Not Necessary	350.10 FL	*- FL
6	1		*FRONT DOOR ADS STICKER	Necessary	180.00 FS	*180.00 FS
7	1		*FRONT DOOR STICKER - CITYCAB	Necessary	160.00 FS	*160.00 FS
8	1		*SUNDRIES	Necessary	50.00 FS	*30.00 FS

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

<b>Sub Total (S\$)</b>	<b>3,153.80</b>	<b>2,694.90</b>
<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	552.76	464.98
<b>Total Parts (S\$)</b>	<b>2,601.04</b>	<b>2,229.92</b>

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	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.	New	500.00	300.00
2	R&R DOOR COMPONENTS & SIDE MIRROR.	New	80.00	60.00
3	RUST PROOFING.	New	50.00	20.00
4	RESPRAY FRONT DOOR & REAR DOOR & SIDE MIRROR.	New	600.00	300.00
Gross Labour Cost (\$\$)			1,230.00	680.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >