INS. CASE OWNE		CC 4 / ASM 180	8 5 1/2 1/4 31	TOAC:	1	0690
Surveyor .	MIN	DOI: ASSIGN	09/2018	Date / Fille /	109 2018	
Pre-assign / CCU	I/FTE C - 0.6			Registered in Merimen:	17	
Insured Vehicle N	SDE 80	X	m (N	Samoo	MP	
Name of insured	Stow Your	Pone Was YNAMP	Claim No.	-		nt
I COUNTY OF THE PARTY OF THE	- con land	Jan d College term !	Policy No.	11		
insured Tel No.	:HF	10 10 8	Make / Model			
Excess Sec II :S5		OY: The antis	Place of Accid	dent: Pending	и	
Is driver the owner	r? (YES / NO) Na	sture of Accident				
If NO, Driver No			OI GIA REPO	ORT: YES / NO ; TP GIA RE	PORT: YA / NO	
Driver Te	9.79(1)-1	(V/L: YES / NO)	Insured Linbil	ity: % Final 7	Yes / No	
(HO 280)	1.7					
-						-
INSRS: WSP: Down!	AWAY - INSRS: WSP.		INSRS:	11 11	SRS:	
H Tel:	H Tel:	0-0	WSP: Tel:	77	SP: d:	
Liability:	Liability:	B-9	Liability:	11 11	ability:	
RMKS:	RMKS:		RMKS:	R	MKS:	
Date/Time						
2/19	8703801 F. X.	DT 20 X X		STAGE	DATE / P	IC.
WA.	DUA DAY	-A		Non-Reporting ltr (1st): Non-Reporting ltr (2nd):		
D/04	Alle - May ONA	to letter.		Non-Reporting ltr (Final):		
				Notification ltr (if non-pickup)	:	
				Call Of 9-119	101	
	11			After call lir to Ol: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7.7.	
	1200	O- LEELE		Notification ltr (if non-pickup)		ut.
6-1-116	PLR OI MO- HO	1 WALLEY	LE.	After call itr to OI:	-	
- 0	\$3000 NO. N	OF MAILS	KLE.	Authorisation To Aut		
	P. 7			Release Voucher:		
				Final Repair Bill:	1	
				Cer Rental Invoice: Towing Invoice	-	
				LTA / GIA	*	-
				Medical Bill		
				PIR:	×	
				(Implate/Reject Instruction:		-
				LOD		100
ELIMINARY ADVICE	Para/Time			Payment Breakdown Ferm:		
ELDIEGICI ADVICI	N/V	Sent By:	_	Post-Repair Photos:		
ALIZATION	Date/Time:	Confirm with:		Others:		
air Cost:	S\$ (days) Reduction:	%	Confirm by:	Tou I	
AL SETTLEMENT	Date/Time: 3 (- 1 - 1 9 Co	enfirm with ALICA		Email Call	Call []	
Liability:		sessed) BOLA S/N No. ;	7	If NO or B 28, Ass. Lin :		
sir Cost:	S81,498. X X			IF AND WED BOLFIES, LIE.		
of Rental (LOR):	85 177.80 (2	days) 88.90			EME	
of Use (LOU): of Income (LOI):	S\$ X (\$ x	daya)		2000	IGINI	
only LOU only	Manage Committee of the	dnys) + LOI Tick only or		(1)	117	
/LTA Search	S\$ 2. X X	+LOI [Tick only or	nej		AT	
ical:	3\$			1) Claim status: Normal/Rej	ect/Drivete Carti	
ursement.	5\$	(e.g. Tow/Independ	ent)	Report Format:	LIVILE SOLIO	
week of the Street At Augustus and	SS 1 (-77 CD			3) Survey fee:	- 3	
d Cost	S\$ 1,6++.80 GI	obal Sum SS:				
d Cost		CONTRACTOR OF STREET				
ni Cost ni: AL PAYMENT	Date/Time: Co	infirm with:	500	Email Call		~
al Cost al: AL PAYMENT cc 1: cc 2: (Strike if N.A.)	Date/Time: Co	me 1: PRIME	CARRE	The second secon	WICES-	PFLL



Prime Auto Claims Service Pte Ltd

GST Reg. No: 201606560M 6 Benoi Place Singapore 629927

Tel: 6861 0908, Fax: 6515 2948

Date: 20.09.2018

AXA Insurance Singapore Pte Ltd 8 Shenton Way #27-01/02 AXA Tower Singapore 068811

Attn: Motor Claims Dept

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer

Signature:

Date:

Resury After upor Sur Chlumbs. wh

RE: ESTIMATE COST OF REPAIR TO VEHICLE SHD2802Z PRIUS HYBRID 1.8L A (2012)

To Supply

1)	1pc	Rear bumper	\$ de 1,218.00
2)	1pc	Rear bumper right side retainer	\$ 177 7 122.25
3)	1pc	Rear bumper left side retainer	\$ VM 7 122.25
4)	1set	Rear bumper clip	\$ 444 30.00
5)	1pc	Rear bumper under cover	\$ 11 × 494.00

Sub total parts	\$	1,986.50
Less: 25% discount	\$	(496.62)
	Ś	1.489.88

To supply S.Nett Parts

1)	1pc	Rear bumper advertisement sticker		\$ M	100.00
2)	1pc	Right rear fender advertisement sticker		\$ nu-	160.00
3)	1pc	Left rear fender advertisement sticker		\$ Ne	160.00
			Sub total S.Nett parts	\$	420.00

L/charge

1)	To remove rear bumper. Knock rear end panel. Replace rear bumper. Align & adjust rear bumper & tail gate.	\$ 450.00
2)	To putty, respray painting rear bumper & rear end panel.	\$ 200.00
	Sub total L/charges	\$ 950.00
	Estimated Grand Total	\$ 2,859.88

Menu



Pls proceed DS with quantum as proposed

Type

Question

Message

Reply



51 UBLAVE 1, 902-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 4009A3 TEL: (065) 62563561 FAX: (065) 62564315

Remarks:

REPAIR NOT A BEHIND	UTHORIZED. HEAD TO REA	AR. INSURED FROM

Mandate:

Liability(TP)		100%	
Proposed repair cost	S	1,498.00	
Loss of use			
Loss of rental	\$	177.80	\$88.90 x 2 days
Loss of income			
LTA search fees	\$	2.00	
Others			
Proposed Total	\$	1,677.80	



51 UBI AVE 1, 802-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 468933 TEL: (668) 62563561 FAX: (668) 62564315

Immediate Advice

To: AXA Insurance Pte Ltd

Date: 9/1/2019

Survey Details:

Date of loss	19-Sep-18
Date of appointment	20-Sep-18
Date of survey	20-Sep-18
Location of survey	PRIME AUTO CLAIMS SERVICE PTE LTD

Vehicle Details:

THIRD PARTY CLAIM	
SHD2802Z	
BL A - 1797cc	
26-Jun-13	
-	
*	

Repair details:

Initial Estimate	\$ 2,859.88
------------------	-------------

Proposed/Revised repair cost:

Parts	\$ 1,356.00
Check Items (estimate)	
Labour	\$ 400.00
Total	\$ 1,756.00
Lump Sum(if applicable)	\$ 1,400.00

Number of days for repair	2 days



Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M 6 Benoi Place Singapore 629927 Tel: 6861 0908 Fax: 6515 2948

Date: 27.09.2018

Our Ref: SHD2802Z LKK ref: Please advice

AXA Insurance (S) Pte Ltd No. 8 Shenton Way #27-01 AXA Tower Singapore 068819

Without prejudice

Attn: Motor Claims Dept

Dear Sir.

ACCIDENT ON 19.09.2018 INVOLVING VEHICLE NO. SHD2802Z & SDE89X

We are on behalf of M/S Prime Car Rental & Taxi Services Pte Ltd owner of SHD2802Y in their third party claim against your insured / driver of vehicle SDE89X

Appended below our client's claim:-

1.	Cost of repair		\$ 1,498.00
2.	Loss of rental @\$88.90 x 2 days		\$ 177.80
3.	GIA search		\$ 2.00
		Total	\$ 1,677.80

We enclosed herewith copy of our Invoice 2572, GIA search receipt, Authorization to Act, Letter of Certification & Police Investigation Result for your retention.

For an amicable direct settlement, please let us have your reply the soonest.

Regards

Yours faithfully,

Ms. Alice Leong

E-mail: aliceleong@primeautoclaims.com

Encl.



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

09 January 2019

SEOW YANG PONG (XIAO YUANPENG) 896 UPPER BUKIT TIMAH ROAD #02-29 THE LINEAR SINGAPORE 678189

Dear Sir/Madam,

OUR REF : CC4/ASM18017131/T1ja3

YOUR REF : SDE 89X

ACCIDENT INVOLVING SDE 89X AND SHD 2802Z ALONG PENDING ROAD ON 19.09.2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Singapore Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s PRIME AUTO CLAIM SERVICE PTE LTD, acting on behalf of the owner of SHD 2802Z against your motor insurance policy.

Based on the accident report and accident scenario, it was reported that your vehicle had hit Third Party vehicle from the rear. As such, liability is down against us.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to joyirene@lkkauto.com within 10 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- · Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

 If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6256 3561 or email us at joyirene@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Yours sincerely,

Joy Irehe Case Handler

DID: 6841 2409 FAX: 6741 4108

Email: joyirene@lkkauto.com

c.c. AXA Insurance Singapore Pte Ltd (AXA) (Motor Claims Dept)

AUTHORISATION TO ACT

1/We Prime Cor Rental 5 Bono; Place	Singapore 629926	Tel No: 68 4	£ 2000
OccupationNA		NRIC No	VA
hereby authorize and appoi	Int Prime Auto Claim	s Service Ple Ud.	to act for me/us for
the purpose of making a thi	rd party claim in respect o	of the abovementioned n	natter.
		25.747	
/We further authorize the	workshop to settle my/ or	ur above mentioned ciair	n in a manner that they
deem fit and the workshop	is also authorized to rec	elve any payment furthe	er to settlement of my
laim with payment cheque			THE STATE OF THE S
E	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
/ We also knowledge that ar	ny settlement the worksho	op may reach on my/our	ehalf is on a "Without
	sion of liability" basis inso		United States and States and States
rejudice and without admis			
Nillano e			
Silitary and the second			
ehicle is concerned.	20th day of God	lear her month of 20	1 <i>8</i>
wehicle is concerned.	oth day of <u>Sep</u>	leng ber month of 20	1 <u>8-</u> -
ehicle is concerned.	20 th day of <u>Sep</u>	leng ber month of 20	118 .
Date the	o th day of <u>Sep</u>	leng bar month of 20	118 -
ehicle is concerned.	of Sept	leng ber month of 20	<u>18</u> .
Date the	o th day of <u>Sep</u>	leng bar month of 20	18 . 2
Date the		Signatu	re or Thumb Print
Date the		Signatu	





CLAIM REF

: S8M00W6T

INSURED

: SEOW YANG PONG

DISCHARGE VOUCHER

We/I PRIME CAR RENTAL & TAXI SERVICES PTE LTD CO REG NO.199606293Z hereby agree to accept the sum of dollars [ONE THOUSAND SIX HUNDRED SEVENTY SEVEN AND CENTS EIGHTY ONLY.] (5\$ 1.677.80) paid to us/me by AXA INSURANCE PTE LTD as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said AXA INSURANCE PTE LTD or their Insured or the driver of motor vehicle no. [SDE 89X] as a result of an accident along [PENDING ROAD] on [19/09/2018] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. [SHD 2802Z].

We/I hereby deciare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said insurer, owner and/or driver of vehicle no. [SDE 89X] in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. [SDE 89X]

February 2019 Dated this PRIME CAR RENTAL & TAXI SERVICES PTE LTD Claimant's Signature NRIC no./ Company Stamp : CO REG NO.199606293Z Occupation/ Business 57630106I WORKSHOP MANAGER Address NO. 5 BENOL PLACE SINGAPORE 629926 Telephone No. Witness's Name Witness's Signature Witness's NRIC No.

AXA Insurance Pte Ltd (Company Reg. No. 199903512M) 8 Shenton Way, #24-01 AXA Tower, Singapore 068611 Customer Centre #81-01 Tel: +65 6880 4888 Fax: +65 6338 2522 Website: www.axa.com.sg

> "The contents of this document apply to vehicles damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document"

TAX INVOICE

No: 2572



Prime Auto Claims Service Pte Ltd

6 Benoi Place Singapore 629927 Tel: 6861 0908 Fax: 6515 2948 GST Reg. No: 201606560M Reg No. 201606560M

MESSRS

AXA Insurance (S) Pte Ltd

27/9/2018 Date:

8 Shenton Way #24-01 AXA Tower Works Order No:

2545

SHD2802Z

	Singapore 068811	Vehicle No: SHD 28022			
ITEM	DESCRIPTION	UNIT PRICE	AMOUNT		
	Make/Model : Toyota Prius Repair Date : 20/9/2018 Terms of Payment: COD				
	Third Party Claims				
1.	Being lump sum repair to the above vehicle.		\$ 1,400.00		
ompound i	interests at the rate of 1% per month ged on late payment.	SUB TOTAL	\$ 1,400.00		
and the Park Hill	#Then respectively full	GST7%	\$ 98.00		
	7	TOTAL	5 1.498.0		

TOTAL

Prepared by

Prime Auto Claims Service Pte Ltd



Prime Taxi Office 5, Benoi Place Singapore 629926 Tel : 6898 2000

Fax: 6862 2628

Email: primetaxi@singnet.com.sg Website: www.primetaxi.com.sg

Co. Cert. No: 199606293Z Gst Reg. No: 19-9606293-Z

Your Ref : Please advise

Our Ref: SHD2802Z

Date

: 24.09.2018

To

: Whom It May Concern

From

: Prime Car Rental & Taxi Services Pte Ltd

RE: LETTER OF CERTIFICATION FOR MR. LIM SWEE HIN

This letter serves to confirm that Mr. Lim Swee Hin, Nric Number S1725663G is a Taxi Master for Prime Car Rental & Taxi Services Pte Ltd hiring the Vehicle Registration Number SHD2802Z for Singapore Dollar Eighty Eight and Cents Ninety (\$88.90) Only.

Should clarification require I can be contacted at 94524182.

Thank you with Best Regards

Yours Sincerely

CHAN KONG LOONG 57830108I WORKSHOP MANAGER

SINGAPORE 629926

Mr Chan Kong Loong Workshop Manager



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffies Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-18-145279

Date of Request:

20/09/2018

Your Ref No:

Online Purchase

Prime Auto Claims Service Pte Ltd

6 Benoi Place Singapore 629927

Dear Sir/Madam,

Enquiry Date

20/09/2018

Enquiry By Vehicle No. Liu Pei Yee SDE89X

Addident Date

19/09/2018

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
TP Verilcie 140.	madret		2000 7000
SDE89X	AXA Insurance Pte Ltd	10/11/2017-09/11/2018	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-145279

Date of Request:

20/09/2018

Your Ref No:

Online Purchase

Prime Auto Claims Service Pte Ltd

6 Benoi Place Singapore 629927

Dear Sir/Madam,

Enquiry Date

20/09/2018

Enquiry By

Liu Pei Yee

Vehicle No.

SDE89X

recident Date

19/09/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[X] GIRO [] Cash [] Cheque

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SDE 89X (Insd veh)		Model:	TOYOTA PRIUS		
	SHD 2802Z (7	(TP veh)				
Date of Accident:	19/09/2018					
Global Sum Settlen	nent : [] Yes	11	X] No			
Repair Estimate	1. 1	\$	3,060.06			
Final Repair Cost		s	1,498.00			
Loss of Token Sum	Ď.	: \$	140,000,000	d	ays at \$0.00 per day	
Rental (if any)		: \$	177.80	417	ays	
LTA / GIA Search F	ee	: \$	2.00			
Others:		: \$	0.00			
Omers.		3	0.00			
		: \$				
Final Settlement Su	im	: \$	1,677.80			
Is Third Party Wor below)	kshop GIA Registered	3 [] YES [X] NO	(Kindly indicate	
A) For Non GIA R	tegistered Workshop:		Agreed Liability	100	(%)	
B) For GIA Regis	tered Workshop:		BOLA Applicable:	Yes/ No	BOLA Scenario No:	
BOLA Liability:	(%)		Assessed Liability	(*):	(%)	
* Assessed Lia	bility to be filled only for	chain co	Illisions and for cas	es where	BOLA does not apply.	
Remarks						
Payment Instruction	n: Payee's Breakdowr					
ALCOHOL: NAME OF THE OWNER, OW	CLAIMS SERVICE PTE				4.077.00	
PRIME AUTO (CLAIMS SERVICE PTE	LIU	: \$		1,677.80	
JOANNE L	EE KHANG MIN	1	11/02/2019			
LKK Auto Co	onsultants Pte Ltd		Date			

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)



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: 199607196R GST Reg. No. 19-9607198-R

		Affiliated to Federation Inte	rnationale Des Experts En Auton	nobile
AXA	INSURANCE PTE	LTD	Ref : CC4/ASM1801	7131/T1ja3q2
٩XA	HENTON WAY #24 TOWERSINGAPO N:CYNTHIA LOH		Date: 11-02-2019 Code: ASM	
1.		Policy Particu	lars :- THIRD PARTY CLA	IM
	Insured Veh.	SDE 89X	Veh. Inspected	SHD 2802Z
	Policy No.	GA289052/1	Coverage (\$)	0.00
	Claim No.	S8M00W6T	Excess (\$)	0.00
	Assign From		Assign Date	20/09/2018
2.		Vehicle I	Particulars & Condition	
	Make & Model	TOYOTA PRIUS	c.c	1797
	Engine No.	HIDDEN	Year of Reg.	2013
	Chassis No.	ZVW305512051	Colour	ORANGE
	Odometer	431338	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
		Co	nditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	185/65 R15	GOODRIDE	6 mm
	L/H Front Tyre	185/65 R15	GOODRIDE	6 mm
	R/H Rear Tyre	185/65 R15	GOODRIDE	6 mm
	L/H Rear Tyre	185/65 R15	GOODRIDE	6 mm
		Desc	ription of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT TH	E REAR PORTION.	
	DAMAGES SEE D	ETAILS.		
		Ge	neral Information	
	Accident Date	19/09/2018 -	Inspection Date	20/09/2018
	Survey held at	PRIME AUTO CLAIMS SE	RVICE PTE LTD	
		6 BENOI PLACE SINGAPORE 629927		
a.			Remarks	
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A	A"WITHOUT PREJUDICE" BAS NS, WE HAVE NOT AUTHORIS	SIS. SED REPAIRS.
b.		Estin	nate Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	2 Working Day	/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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 2802Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER(CONSISTENT)	DEFORMED	1,218.00	1,218.00
1	REAR BUMPER RIGHT SIDE RETAINER(CONSISTENT)	NOT NECESSARY	122.25	13
1	REAR BUMPER LEFT SIDE RETAINER(CONSISTENT)	NOT NECESSARY	122.25	23
1	SET REAR BUMPER CLIP(CONSISTENT)	NECESSARY	30.00	30.00
1	REAR BUMPER UNDER COVER(CONSISTENT)	NOT NECESSARY	494.00	- 8
	LESS 25% DISCOUNT		-496.63	-312.00
			1,489.87	936.00
	SPECIAL NETT ITEMS			
1	REAR BUMPER ADVERTISEMENT STICKER (SN) (CONSISTENT)	NECESSARY	100.00	100.00
1	RIGHT REAR FENDER ADVERTISEMENT STICKER (SN) (CONSISTENT)	NECESSARY	160.00	160.00
1	LEFT REAR FENDER ADVERTISEMENT STICKER (SN) (CONSISTENT)	NECESSARY	160.00	160.00
			420.00	420.00
	LABOUR			
	TO REMOVE REAR BUMPER. KNOCK REAR END PANEL. REPLACE REAR BUMPER. ALIGN & ADJUST REAR BUMPER & TAIL GATE.		450.00	200.00
	TO PUTTY, RESPRAY PAINTING REAR BUMPER & REAR END PANEL.		500.00	200.00
			950.00	400.00
	GRAND TOTAL		2,859.87	1,756.00

RECOMMENDED COST OF LUMP SUM REPAIRS	1,400.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CC4/ASM18017131/T1ja3q2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

HO LEONG CHUAN

Automotive Assessor

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

« Service Request Details

SHD28022 Incident Vehicle Registration #

Wait fac Approve invoice

Next Step

CC4/ASM18017131/71ja3q2

Reference

58MOOM67

Claim

19 September 2018

Loss Date

10 January 2019

Request Date

Due Date

Actions

PRILS HYBRID-1.8 (A) TPVD TOYOTA

Service Address

LICK AUTO CONSULTANTS PTE

Vendor Name

Pending verification - Direct Settlement

Services

Third Party Wehicle Damage

Type of Loss

Primary Contact/Insured

SECW YANG PONG DUAC YUANPENG) 196 UPPER BURGT TBAAH ROAD, #02-29 THE LINEAR, 678189, Segapore

SMMINS@YAHOO.CDM.5G

Claim Handler

WANG Peter

peterwang@asa.com.sg

NON REPORTED Additional Instructions

Motors Memos Assessment Documents History Invoices. Messages

Document Sublype

Document Type

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Reports 6 Statement

Accident Statement

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AUTHOR

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DATE	9 January 2019	30 October 2018	29 October 2018	29 October 2018		1 October 2018	20 September 2018
AUTHOR	LIKK AUTO CONSULTANTS PTE LTD (TP)	LEE Jusephere	YU Dominic Yishan	YU Dominic Ylahan	YLJ Demyne Yirkan	LIGICALITO CONSULTANTS PTE LTD (TP)	RATAN BHOSALE Progut
SAB-TVPE	Others	Policy Holders / Insured	Policy Schedule / Covernole / Certificate of insurance	Palley Schedule / Covernote / Certificate of invarance	GIA Report	Estimate / Quotation	
TATE	Reports & Statement	Letters and Correspondence	Forms / Chim Documents	Farms / Claim Dacaments	Reports 6 Statement	Reports 6 Statement	Letters and Correspondence
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