

ASS. REC. BY:

REF: CS/ALH18018166/Usb m2

Special Instruction:

Surveyor

ASSIGNMENT (Office)

Mufiman

From (Person): Syazairina of ALH Date/Time: 08102018 2pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SGH 3655R Insured: SBR 5280G

at Workshop m/s Imperium Automotiva Tel: 9748 9940

of 25 Makki Bukit Rd 4 #01-49

Policy No: Claim No: 8285382341SG1003

Sum Insured: Excess:

Make of Veh: D.O.A. 04-10-2018

(Client's Record)

CA / REV / REP. / REV 24 HRS Wp

H.O.D. Endorsement:

Date/Time: 08-10-2018 2.16pm Person Contacted: Shuan Vehicle IN ~~OUT~~

Date/Time	Action/Instruction (✓) Estimate
	SGH 3655R - NA/INC18018077/h4
	SBR 5280G - X

DA: 0110 2018

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: SGH365R  
 at Workshop m/s: anytime  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: SGH365R Yr Regn: 8/6/06  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or  
 Make: Horde city CC: 1497  
 Colour: blue A/C: Insured / Std / NI / NA  
 Sp. Reading: 247267 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: MRHGD865069040223  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: order / Jammed / Leaked / Burnt or  
 Brake: order / Jammed / Leaked / Burnt or  
 Modi: Nil / SRim / STD A/Rim or  
 Tyre Size: F: 195/55-215  
 R: \_\_\_\_\_

(Policy Condition)  
 Remark: The veh had commenced its repair at the time of inspection.  
 Bal. or Market Value: 16500/-  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: 7 days Res.: Yes or No  
 Lum Sum: 20 % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS 3.15/2024  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
 Vehicle: IN / OUT

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or  
 Front 6 mm R/Bal. 6 mm  
 L/Bal. 6 mm R/Bal. 6 mm  
 D.O.A. 4/10/18 D.O.I. 8/10/18  
 Survey held at \_\_\_\_\_  
 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
	<u>LTA 12031 2yrs. Take-act + 4469</u>
<u>15/10/18</u>	<u>4300 confirmed with shown.</u>
<u>15/10/18</u>	<u>Confirmed L/S \$ 4,300/- @ 7 days with Marcus (\$7,574.60 Red - 64%)</u>

RECEIVED 15 OCT 2018

Date/Time, File Pass to? 15/10/18 typ-st  
 : Preli. Report  
 : Final Report  
 Date/Time, File Return to? \_\_\_\_\_  
 Days Of Repair: 7  
 Resurvey No. of Trip: 2  
 Survey Fee: \_\_\_\_\_  
 Transportation: 250  
 Add Fee:  Site Insp (\$ ) 20  
 Interview (\$ )  
 Tech. Invs (\$ )  
 Weekend (\$ )  
 Report Format: \_\_\_\_\_  
 Lump Sum / I.B.I. (\$) 4,300/- L/S  
 TOTAL: 270

- Pre repair inspection request - SGH3655R VS SBR5280G (OI) DOA 04/10/2018

From: Azlan, Syazairdina  
To: admin-a@lkkauto.com, assignments@lkkauto.com  
Cc: Fong, Andy-SY, Chin, Lee-Ying, Abu Kassim, Noor Mariesa, Md Ishak, Mohd Imran, Lim, Sheng Yang, Mithoosingh, Aashweenjeetkaur, Chan, Yoke Shi  
Sent: Monday, 8 October, 2018 2:00:41 PM  
Attachments:  tmp47AB.TIF

Hi,

Please refer to the enclosed request from **JusEquity Law Corporation**.

Claim no : 8285382341SG003  
Case Owner : MING YAO LEE

If you have any queries/concerns, please let us know.  
Kindly assist to assign Marcus Chua as Single Joint Expert as requested.

Thanks and regards,

Syaza Irdina Azlan  
AIG  
Express Claims Adjuster II  
SG Claims Operations | AIG Shared Services

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**From:** Alfred Ng [mailto:alfred\_ng@juseq.com.sg]  
**Sent:** Monday, October 08, 2018 12:53 PM  
**To:** Azlan, Syazairdina  
**Subject:** Fw: ACCIDENT INVOLVING SGH3655R AND SBR5280G ON 04/10/2018

Your ref: 8285382341SG003  
Our ref: JEQ/SGH3655R/IMP

Dear Sirs,

We refer to your email today.

Our client is agreeable to appoint the following surveyor as our single joint expert.

Marcus Chua (LKK Auto Consultants Pte Ltd)

Please be informed that our client's vehicle is available for inspection at the understated workshop:-

**IMPERIUM AUTOMOTIVE**  
25 Kaki Bukit Road 4 #01-49,  
**Synergy@KB**  
Singapore 417800  
Tel:9748 9940 Fax: 6346 7213

With Regards

Alfred Ng  
Executive  
On behalf of Mr Michael Yap  
M/s JusEquity Law Corporation  
No. 171 Chin Swee Road  
#02-01/02/06 Singapore 169877  
Tel : 6536 9339  
Fax: 6536 5368

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From: Syazairdina.Azlan@aig.com  
To: juseq@singnet.com.sg  
Cc: Andy-SY Fong@aig.com, Lee-Ying.Chin@aig.com, NoorMariesa.AbuKassim@aig.com, Imran.Ishak@aig.com, ShengYang.Lim@aig.com, Aashweenjeetkaur.Mithoosingh@aig.com, yokeshi.chan@aig.com

> **Back to OneMotoring**

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	9941Z
<b>Vehicle Details</b>	
Vehicle No.:	SGH3655R
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Oct 2018
Vehicle Make:	HONDA
Vehicle Model:	CITYVTEC CVT
Primary Colour:	Blue
Manufacturing Year:	2006
Engine No.:	L15A14802816
Chassis No.:	MRHGD86506P040223
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$17,204.00
Original Registration Date:	08 Jun 2006
First Registration Date:	08 Jun 2006
Transfer Count:	2
Actual ARF Paid:	\$18,925.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	31 May 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$22,789.00
COE Rebate Amount:	\$12,031.00
<b>Total Rebate Amount:</b>	<b>\$12,031.00</b>
<b>Message</b>	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 10 Oct 2018

OK

## 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 willful 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. 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	05/10/2018 11:40
Date Of Accident	04/10/2018 18:40
Exact Location Of Accident	JUNC WITH BT TIMAH RD & CLEMENTI RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH3655R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SUM WAI HONG
NRIC No	S8009941Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94558613
Alternative Phone No	OFFICE-94558613

### Vehicle Particulars

Manufacturer	HONDA
Model	CITY
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101126377
Cover Note Number	-

### Driver

Name of Driver	SUM WAI HONG
NRIC No	S8009941Z
Date Of Birth	24/03/1980
Occupation	INDOOR
Date Of Driving Pass	23/02/1999
Driving Experience	19 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94558613
Fax Number	
Contact Number	OFFICE-94558613
Email Address	NOEMAIL

Address	BLK 305 JURONG EAST ST 32 #05-146
Postcode	600305
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

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

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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)	1

#### 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

I WAS TRAVELLING ALONG BT TIMAH RD WHILE APPROACHING JUNC WITH CLEMENTI RD, VEH INFRONT OF ME STOP DUE TO TRAFFIC CONGESTED, AS SUCH I FOLLOW TO STOP, ALL OF A SUDDEN I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B (BEARING NO SBR5280G) FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION.

#### 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	SBR5280G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DAVIS CHENG SOONG LIN
NRIC/Passport Number	S9235708B
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.:

SKETCH PLAN

Clementi Rd



B7 Timah Rd

A = SGH 3655R

B = SBR 5280G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to statement 47

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.:



**SINGAPORE  
POLICE FORCE**



T/20181005/2136

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

1 of 3

Report No. T/20181005/2136

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/10/2018 21:16	Vide Report No.:	Station Diary No.: 134
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**Informant's Particulars**

Name of Informant: SUM WAI HONG		Address: APT BLK 305 JURONG EAST STREET 32 #05-146 SINGAPORE 600305	
ID Type / ID No.: NRIC NO / S8009941Z		Contact No.:	Mobile: 94558613
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 38	Date of Birth: 24/03/1980	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: FINIANCIAL PLANNER		Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/10/2018 18:40	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH ROAD				
Before Junction of Clementi Rd Left lane.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	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
SBR5280G	Car	NISSAN	SUNNY 1.6EXA		Slightly Damaged	0
SGH3655R	Car	HONDA	CITYVTEC CVT	Blue	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGH3655R	NTUC Income Insurance Co-Operative	5101126377	08/06/2018	07/06/2019



**SINGAPORE  
POLICE FORCE**



T/20181005/2136

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

3 of 3  
Report No. T/20181005/2136

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
D /  
Sgt 1 ANG BINGLUN, BRENDON *[Signature]*

Signature Of Informant:  
*[Signature]*

Signature Of Interpreter:  
Not applicable

Date/Time:  
05/10/2018 21:16

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

Classification Of Case:

Authentication Stamp  
NP166 *[Stamp]* SN 35 *[Signature]*



**SINGAPORE  
POLICE FORCE**



T/20181005/2136

2 of 3

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

Report No. T/20181005/2136

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Driver			
Name	SUM WAI HONG	ID No.	S8009941Z
Related Vehicle	SGH3655R (Car)	Contact No.	94556613
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	05/10/2018	Date Discharge	05/10/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight

**Brief Details.**

On the 04/10/2018 at about 1840hrs, I was driving my car bearing registration plate number: SGH3655R going home along Bukit Timah Rd heading towards upper bukit timah rd. Before the junction of Clementi Rd, I noticed that there was a jam at the traffic light even though it is green, I then slowed down and stopped behind the stop line. As I stopped, a car behind me bearing registration plate number: SBR5280G then hit onto my rear. I then went out and exchange particulars and took photograph of the damage. I sustain a slight headache from the accident however no one was conveyed to the hospital.

I wish to state that I have a camera in my vehicle however the footage was not recorded. I think the vehicle that hit onto me also does not have any cameras. I am making this report for insurance purposes.

# IMPERIUM AUTOMOTIVE

25 Kaki Bukit Road 4 #01-49 Synergy@KB, Singapore 417800

HP : 9748 9940 Shawn Tan Fax : 6346 7213

Email: shawn7530@hotmail.com

25 September 2018

Vehicle No.: SGH 3655R

Model: Honda City

<u>QTY</u>	<u>DESCRIPTION</u>	<u>AMT S\$</u>
	<u>List Items</u>	
1	Rear windscreen moulding	11 \$ 86.50 X
1	Rear boot lid	10/bull \$ 795.20 /
2	Rear boot hinges	2 \$ 168.80 X
1	Rear boot inner lock	2w1 \$ 149.60 /
1	Rear boot lock catch	11 \$ 45.00 X
1	Rear boot logo	2w1 \$ 52.50 /
1	Rear boot weatherstrip	1w1 \$ 107.90 /
1	Rear boot "CITY" emblem	2w1 \$ 45.60 X
1	Rear boot "i-VTEC" emblem	2w1 \$ 42.70 X
1	Rear boot outer chrome moulding	2w1 \$ 242.50 X
2	Rear taillamps	275-60x2=551.20 CM \$ 991.20 /
2	Rear taillamp panels	10/bull \$ 301.00 /
2	Rear taillamp lower brackets	11 \$ 77.20 X
1	Rear end panel	3w1/10 \$ 525.50 /
1	Rear end panel inner garnish	2w1 \$ 135.50 /
1	Rear bumper	2w1 \$ 670.60 /
2	Rear bumper brackets	2w1 \$ 90.00 /
2	Rear bumper side retainers	2w1 \$ 77.20 /
1	Rear bumper splash shield	11 \$ 58.60 X
1	Rear floor panel insulator	2w1 \$ 911.40 2505-N
1	Rear floor board	2w1 \$ 146.80 /
1	Rear exhaust silencer	2 \$ 894.20 X
2	Rear exhaust mountings	11 \$ 57.20 X
2	Rear fenders	2 \$ 1,531.20 X
2	Rear fender inner trims	11 \$ 393.80 X
2	Rear fender inner air vents	11 \$ 76.80 X
		\$ 8,674.50
		Less 20% \$ 1,734.90
		\$ 6,939.60

not approved  
also

2/5 @ 4300  
Tdy.

8/10/18  
Shawn Tan  
PAGE 1 OF 2

<u>Special Nett Items</u>			
1	Rear windscreen sealant	\$ 11	80.00 X
1	Rear bumper clip (1 set)	\$ net	45.00 40
1	Rear reverse sensor (1 set)	\$ Sub	350.00 200
		\$	475.00

<u>S/N.</u>	<u>Labour Charges</u>		
1	To remove, replaced damaged lamps and check up rear wiring.	\$	80.00 30
2	To remove and refit inner garnishes.	\$	180.00 80
3	To remove and refit rear reverse sensor.	\$	150.00 50
4	To transfer boot lid mechanism and wiring assembly.	\$	120.00 30
5	To remove and refit rear windscreen glass.	\$ 11	180.00 X
6	To remove, refit and replace exhaust silencer and mountings.	\$	150.00 60
7	To apply tuff kote.	\$	200.00 80
8	Panel beating.	\$	1,800.00 1000
9	To respray painting on the affected areas.	\$	1,600.00 1100
		\$	4,460.00

**Grand Total : \$ 11,874.60**

LKK Auto Consultants hence notify the Repairer of the following:

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

Acknowledged by Repairer  
 Signature:  
 Date:

## 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/AIG18018166/USBN2  
Date: 16/10/2018

#### REFERENCE

Handling Insurer:	AIG Asia Pacific Insurance Pte. Ltd.	Policy No:	0100545642
Claimant Vehicle No :	SGH3655R	Insured Vehicle No :	SBR5280G
Date of Loss:	04/10/2018	Nature of Claim:	TP
			Claim No: 8285382341SG

#### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SGH3655R	Engine No:	L15A14802816
Make & Model:	HONDA CITY, 1.5 (A)	Chassis No:	MRHGD86506P040223
Reg. Date:	08/06/2006 (Man. Year: 2006)	Odometer:	247267 km
Colour:	Blue		
Engine Capacity:	1497 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:	195/55R15	Rear Tyre Size:	195/55R15
Front Left Side:	Dunlop 6 mm	Rear Left Side:	Dunlop 6 mm
Front Right Side:	Dunlop 6 mm	Rear Right Side:	Dunlop 6 mm

*The above values represent the remaining tyre treads depth*

#### COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	7,414.60	3,005.92	4,408.68	59.46
Miscellaneous Items	0.00	0.00	0.00	
Labour	4,460.00	2,430.00	2,030.00	45.52
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>11,874.60</b>	<b>5,435.92</b>	<b>6,438.68</b>	<b>54.22</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>4,300.00</b>		
<b>Nett Amount (S\$)</b>	<b>11,874.60</b>	<b>4,300.00</b>	<b>7,574.60</b>	<b>63.79</b>

#### INSPECTION

Date of Assignment:	08/10/2018	
Date Inspected:	08/10/2018	Inspected At: Imperium Automotive - Kaki Bukit (HQ) 25 Kaki Bukit Road 4, #01-49 Synergy@KB Singapore 417800
Estimated Period of Repair:	7.0 days	

Adjuster: MARCUS CHUA

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

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR WINDSCREEN MOULDING	Not Necessary	86.50 FL	*- FL
2	1		*REAR BOOT LID	Dented/Buckled	795.20 FL	*566.20 FL
3	2		*REAR BOOT HINGES	Repair	168.80 FL	*- FL
4	1		*REAR BOOT INNER LOCK	Twisted	149.60 FL	*149.60 FL
5	1		*REAR BOOT LOCK CATCH	Not Necessary	45.00 FL	*- FL
6	1		*REAR BOOT LOGO	Necessary	52.50 FL	*52.50 FL
7	1		*REAR BOOT WEATHERSTRIP	Twisted	107.90 FL	*107.90 FL
8	1		*REAR BOOT CITY EMBLEM	Not fitted	45.60 FL	*- FL
9	1		*REAR BOOT I-VTEC EMBLEM	Not fitted	42.70 FL	*- FL
10	1		*REAR BOOT OUTER CHROME MOULDING	Not fitted	242.50 FL	*- FL
11	2		*REAR TAILLAMPS	Cracked	991.20 FL	*551.20 FL
12	2		*REAR TAILLAMP PANELS	Dented/Bent	301.00 FL	*301.00 FL
13	2		*REAR TAILLAMP LOWER BRACKETS	Not Necessary	77.20 FL	*- FL
14	1		*REAR END PANEL	Badly Dented	525.50 FL	*525.50 FL
15	1		*REAR END PANEL INNER GARNISH	Twisted	135.50 FL	*135.50 FL
16	1		*REAR BUMPER	Distorted	670.60 FL	*441.50 FL
17	2		*REAR BUMPER BRACKETS	Bent	90.00 FL	*90.00 FL
18	2		*REAR BUMPER SIDE RETAINERS	Bent	77.20 FL	*77.20 FL
19	1		*REAR BUMPER SPLASH SHIELD	Not Necessary	58.60 FL	*- FL
20	1		*REAR FLOOR BOARD	Torn	146.80 FL	*146.80 FL
21	1		*REAR EXHAUST SILENCER	Repair	894.20 FL	*- FL
22	2		*REAR EXHAUST MOUNTINGS	Not Necessary	57.20 FL	*- FL
23	2		*REAR FENDERS	Repair	1,531.20 FL	*- FL
24	2		*REAR FENDER INNER TRIMS	Not Necessary	393.80 FL	*- FL
25	2		*REAR FENDER INNER AIR VENTS	Not Necessary	76.80 FL	*- FL
26	1		*REAR FLOOR PANEL INSULATOR	Necessary	729.12 FS	*250.00 FS
27	1		*REAR WINDSCREEN SEALANT	Not Necessary	80.00 FS	*- FS
28	1		*SET REAR BUMPER CLIP	Necessary	45.00 FS	*40.00 FS
29	1		*SET REAR REVERSES ENSOR	Shorted	350.00 FS	*200.00 FS

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

<b>Sub Total (S\$)</b>	<b>8,967.22</b>	<b>3,634.90</b>
- List Item Discount on L Items 20.00/20.00% (S\$)	1,552.62	628.98
<b>Total Parts (S\$)</b>	<b>7,414.60</b>	<b>3,005.92</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
<b>Labour Items</b>				
1	TO REMOVE,REPLACED DAMAGED LAMPS AND CHECK UP REAR WIRING	New	80.00	30.00
2	TO REMOVE AND REFIT INNER GARNISHES	New	180.00	80.00
3	TO REMOVE AND REFIT REAR REVERSE SENSOR	New	150.00	50.00
4	TO TRANSFER BOOT LID MECHANISM AND WIRING ASSEMBLY	New	120.00	30.00
5	TO REMOVE AND REFIT REAR WINDSCREEN GLASS	New	180.00	-
6	TO REMOVE,REFIT AND REPLACE EXHAUST SILENCER AND MOUNTINGS	New	150.00	60.00
7	TO APPLY TUFF KOTE	New	200.00	80.00
8	PANEL BEATING	New	1,800.00	1,000.00
9	TO RESPRAY PAINTING ON THE AFFECTED AREAS	New	1,600.00	1,100.00
<b>Gross Labour Cost (S\$)</b>			<b>4,460.00</b>	<b>2,430.00</b>

Report was unsubmitted during this print-out.

< END OF ESTIMATES >