

ASS. REC. BY:

REF:

CS/MSG18018448/ Kcd30

Special Instruction:

Surveyor:
Munim

Kenneth

ASSIGNMENT (Office)

From (Person):

Chhia Nyuk pui

of

MSG

Date/Time:

10/10/18 @ 4:24pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJL 6124E

Insured:

SJK 2365H

at Workshop m/s

Sin Ming Autocare

Tel:

6455 0600

of

176 Sin Ming Drive #02-05

Policy No:

29088952 TMP

Claim No:

572646

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

9/10/2018

CA / REV / REP. / REV 24 HRS

'up'

12/10/18 @ morning

Date/Time:

11/10/18 @ 10:38am

Person Contacted:

Angela

H.O.D. Endorsement:

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SJL 6124E - X

SJK 2365H - X

29/11 11 Sy @ 3850 email & confirm (Red. 3717.25, 49%)

REF: msth

Signature
Maimun

ASSIGNMENT

From: Date: 12.10.2018

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

06

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

STL 6124E Yr Regn: 12 08

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

Truck / Trailer or

Make:

Toy Wish

c.c

1798

Colour:

M. Pike

A/C:

Insured / Std / NI / NA

Sp. Reading

235 / 49

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JTD ER 12W 503 000 996

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD ARIM or

Tyre Size:

F:

R:

195 / 65R15

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

TOYO / YOKO or

Front

Rear

R/Bal.

3

mm

R/Bal.

4

mm

L/Bal.

3

mm

L/Bal.

4

mm

D.O.A.

9/10/18

D.O.I.

12/10/18

Survey held at

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

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time

Action / Instruction

15/10 File pass to Catherine

RECEIVED 05 DEC 2018

Date/Time, File Pass to?

☐

Preli. Report

1) *

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

1

Survey Fee:

150

Transportation

) \$ = RS \$

) Photos

) Others

TOTAL

10

160

Report Format :

TP

Lump Sum / I.B.I. (\$

3850/-

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	10 Oct 2018		10 Oct 2018 16:24 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	LOW JING LIANG, ID: S9132872J		
Main Claimant:	KAMSANI BIN ISMAIL, ID: S1407222E		
Vehicle Reg. No.:	SJK6124E	Date of Loss:	09/10/2018 21:00 - :59 [118 Months and 5 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / 572646	Policy/Cover Note No.:	29088952TMP (Third Party Only) Coverage: 14/07/2018 - 13/07/2019
Vehicle Reg. No. (Insured):	SJK2365H	Policy No. (Claimant):	
		Excess:	
Repairer:	Sin Ming Autocare BFG Pte Ltd (HQ) 176, Sin Ming Drive #02-05, Sin Ming Autocare Complex, 575721 Sin Ming - Tel: 64550600		
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 11/10/2018]		
Adj Asg. Remarks:	SURVEY AGREE ON SJE - REQ TO ASSIGN LKK (KENNETH).OI NOT REPORTED. CONTACT: ANGELA TAN 6455 0600		

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.									

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	7222E
Vehicle Details	
Vehicle No.:	SJL6124E
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 AUTO
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	1ZZ3161361
Chassis No.:	JTDER12W503000996
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$18,803.00
Original Registration Date:	04 Dec 2008
First Registration Date:	04 Dec 2008
Transfer Count:	0
Actual ARF Paid:	\$6,730.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	03 Dec 2028
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$31,553.00
COE Rebate Amount:	\$31,534.00
Total Rebate Amount:	\$31,534.00

The information contained herein is correct as at 05 Dec 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 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. 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	10/10/2018 10:52
Date Of Accident	09/10/2018 21:30
Exact Location Of Accident	ANG MO KIO AVE 5 BEFORE ANG MO KIO NORTH FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL6124E
Insured/Policyholder	
Name Of Registered Owner	KAMSANI BIN ISMAIL
NRIC No	S1407222E
Email Address	SYAINI2121@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91175261
Alternative Phone No	OFFICE-91175261
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	5040484807-08
Cover Note Number	DRIVO CLASSIC
Driver	
Name of Driver	NENG SULAINI BINTE KAMSANI
NRIC No	S9421706G
Date Of Birth	18/06/1994
Occupation	INDOOR
Date Of Driving Pass	21/04/2015
Driving Experience	3 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98864396
Fax Number	
Contact Number	OFFICE-98864396
Email Address	SYAINI2121@GMAIL.COM

Address	912 HOUGANG STREET 91 #11-46
Postcode	530912
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	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)	3
Passenger 1	NAME: : KAMSANI BIN EMAIL GENDER: : MALE
Passenger 2	NAME: : SITI ZUHAI DAH 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 ATTACHED FILE

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	SJK2365H
Vehicle Make/Model/Colour	HONDA FIT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LOW JING LIANG
NRIC/Passport Number	S9132872J
Contact Number	98766676
Address	
Postcode	

Insurance Company Name

MSIG INSURANCE (SINGAPORE) PTE. LTD.

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:

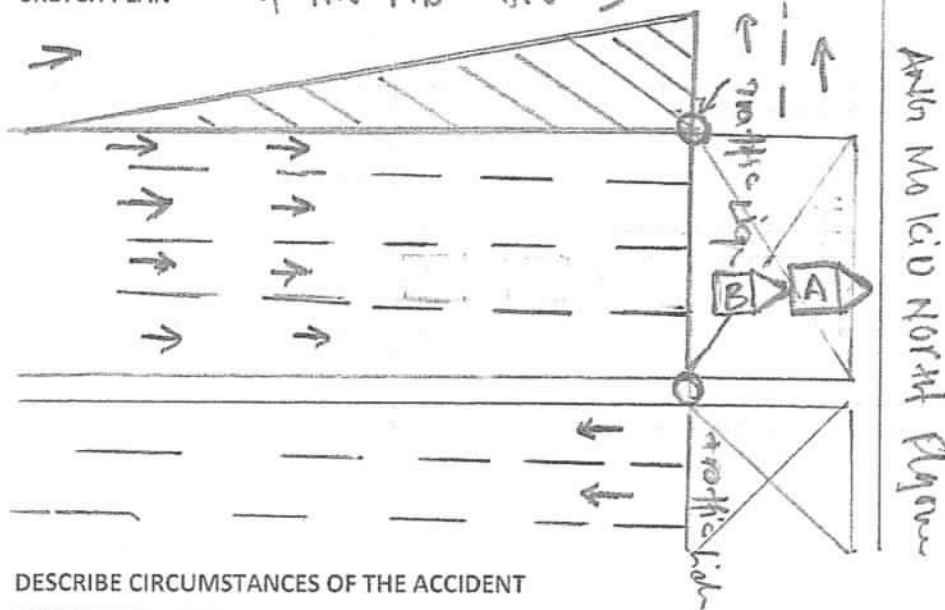
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN

Ang Mo Kio Ave 5



A: SJC 6124E
B: SJK 2365H

ing

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 9/10/2018 at 2130 Hrs, I was driving along Ang Mo Kio Ave 5. Upon reaching at four junction near ang mo kio north flyover, I was at the traffic light and when it turns green, I was behind 2 cars at that moment. I slowly proceed forward following the car in front of me. Due to heavy traffic, the car in front of me have stop. When all the vehicle come to a halt, suddenly a car from the back slam my car. There was no injury.

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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



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



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
Sin Ming Autocare Complex
Singapore 575721
Tel : (65) 6455 0600
Fax : (65) 6455 6192
Website: www.autocare.com.sg
GST Reg. No: 20-0210033-N

MSIG INSURANCE (SINGAPORE) PTE.LTD

16 RAFFLES QUAY #24-01
HONG LEONG BUILDING 048581

Attention : Motor Claim Department

Contact : 68277660 Fax No. : 68856371

Estimate : E18/2462

Date : 10/10/2018

Vehicle Num. : SJL6124E

Make/Model : TOYOTA WISH-2008

Chassis/Eng# : JTDER12W503000996/1ZZ3161361

Accident Date : 09/10/2018

Claim No. : BFG

Reference : TP CLAIM

Policy No. : 5040484807-08

Not Authorized
61 Rm @ 3850h
Resurvey After Paint

S/N Quantity Particular *6 days* Unit Price Amount S\$

LIST ITEMS :		
1.	1PC	TAIL GATE
2.	1PC	TAIL GATE CHROME GARNISH
3.	1PC	TAIL GATE LOCK
4.	1PC	TAIL GATE RUBBER
5.	1PC	REAR BUMPER
6.	1PC	REAR BUMPER SIDE RETAINER - LH
7.	1PC	REAR BUMPER SIDE RETAINER RH
8.	1PC	REAR BUMPER BRACKET LH
9.	1PC	REAR BUMPER BRACKET RH
10.	1PC	REAR BUMPER SPOILER - LOWER
11.	1PC	REAR END PANEL
12.	1PC	REAR END PANEL TOP GARNISH
13.	1PC	TAIL LAMP ASSY - RH
14.	2PCS	TAIL LAMP PANEL
15.	1PC	EMBLEM
16.	1PC	REAR WINDSCREEN GLASS MOULDING

List TotalS\$:

25.00% Discount S\$:

<i>Bt</i>	1,209.00	<i>✓</i>
<i>Rm</i>	381.00	<i>X</i>
<i>Dm</i>	443.00	<i>✓</i>
<i>151.50SN</i>	303.00	<i>500</i>
<i>Rm</i>	496.00	<i>✓</i>
<i>Dm</i>	60.00	<i>✓</i>
<i>Dm</i>	60.00	<i>✓</i>
<i>Rm</i>	55.00	<i>X</i>
<i>Rm</i>	55.00	<i>X</i>
<i>CM</i>	350.00	<i>✓</i>
<i>Rm</i>	475.00	<i>✓</i>
<i>Dm</i>	245.00	<i>✓</i>
<i>Rm</i>	497.00	<i>X</i>
<i>175.00</i>	350.00	<i>X</i>
<i>Rm</i>	68.00	<i>✓</i>
<i>Rm</i>	180.00	<i>✓</i>
	5,227.00	
	1,306.75	
	3,920.25	

SPECIAL NETT ITEMS :		
1.	1PC	TAIL LAMP ASSY - LH
2.	1TUBE	REAR WINDSCREEN GLASS SEALANT
3.	1SET	REVERSE SENSOR
4.	1PC	WEEKEND PLATE SEAL
5.	1PC	WEEKEND SEAL

Special Nett Total S\$:

<i>Rm</i>	497.00	<i>X</i>
<i>Rm</i>	25.00	<i>✓</i>
<i>Rm</i>	250.00	<i>X</i>
<i>Rm</i>	30.00	<i>✓</i>
<i>Rm</i>	15.00	<i>✓</i>
	817.00	

CONTINUE / ...

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: _____



Sin Ming Autocare BFG Pte Ltd

176, Sin Ming Drive #02-05
 Sin Ming Autocare Complex
 Singapore 575721
 Tel : (65) 6455 0600
 Fax : (65) 6455 6192
 Website: www.autocare.com.sg
 GST Reg. No: 20-0210033-N

MSIG INSURANCE (SINGAPORE) PTE.LTD
 16 RAFFLES QUAY #24-01
 HONG LEONG BUILDING 048581

Attention : Motor Claim Department
 Contact : 68277660 Fax No. : 68856371

Estimate : E18/2462

Date : 10/10/2018
 Vehicle Num. : SJL6124E
 Make/Model : TOYOTA WISH-2008
 Chassis/Eng# : JTDER12W503000996/1ZZ3161361
 Accident Date : 09/10/2018
 Claim No. : BFG
 Reference : TP CLAIM
 Policy No. : 5040484807-08

S/N	Quantity	Particular	Unit Price	Amount S\$
-----	----------	------------	------------	------------

LABOUR :
 TO CHECK WATER SEEPAGE.
 TO PANEL BEATING ALL AFFECTED AREAS
 TO PUTTY & SPRAY PAINT ON ALL AFFECTED AREAS
 TO APPLY ANTI-RUST
 TO CHECK WIRING
 TO REMOVE & REINSTALL REVERSE SENSOR.
 TO REMOVE & REINSTALL REAR WINDSCREEN GLASS
 TO REMOVE & REFIX INTERNAL UPHOLSTERY

Labour Total S\$:

700l	100.00	20l
900l	1,000.00	
	1,200.00	
	80.00	60l
20l	80.00	
	100.00	50l
	120.00	
	150.00	60l
	<u>2,830.00</u>	

E. & O.E.

Total S\$: 7,567.25

for Sin Ming Autocare BFG Pte Ltd

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	10 Oct 2018		10 Oct 2018 16:24 Edit Adj Rpt	S\$3,850.00 Edit Estimates	S\$3,850.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	LOW JING LIANG , ID: S91328723								
Main Claimant:	KAMSANI BIN ISMAIL , ID: S1407222E								
Vehicle Reg. No.:	SJL6124E	Date of Loss:	09/10/2018 21:00 - :59 [118 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 572646	Policy/Cover Note No.:	29088952TMP (Third Party Only) Coverage: 14/07/2018 - 13/07/2019						
Vehicle Reg. No. (Insured):	SJK2365H	Policy No. (Claimant):							
		Excess:							
Repairer:	Sin Ming Autocare BFG Pte Ltd (HQ) 176, Sin Ming Drive #02-05, Sin Ming Autocare Complex, 575721 Sin Ming - Tel: 64550600								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Chhia Nyuk Pui - 6594 2521]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 09/11/2018]								
Adj Asg. Remarks:	SURVEY AGREE ON SJE - REQ TO ASSIGN LKK (KENNETH).OI NOT REPORTED. CONTACT: ANGELA TAN 6455 0600								
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

***SJL6124E (572646)**
[SJK2365H]
TP
KAMSANI BIN ISMAIL
Oct 9 2018 9:00PM
[LOW JING LIANG]
Sin Ming Autocare BFG 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	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print					
1	16/10/18 17:05	Accident Statement From: SC - Reg. No: SJK2365H, Claimant: LOW JING LIANG			Load HTM					
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print					
1	05/12/18 08:53	Adjuster Immediate Advice			Load HTM					
Photos/Images							3 per page		<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print					
1	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
2	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
3	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
4	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
5	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
6	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
7	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
8	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
9	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
10	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
11	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
12	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
13	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
14	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
15	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
16	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
17	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
18	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
19	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
20	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
21	05/12/18 08:38	General View			<input checked="" type="checkbox"/>					
22	05/12/18 08:44	Photo After Spray			<input checked="" type="checkbox"/>					
23	05/12/18 08:44	Photo After Spray			<input checked="" type="checkbox"/>					
Documentation							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print					
1	10/10/18 11:42	SJL6124E TP E-FILE REPORT			Load PDF					
2	10/10/18 11:42	EMAIL FROM TP TO ARRANGE SURVEY			Load PDF					
3	10/10/18 11:58	SURVEY AGREE ON SJE - REQ TO ASSIGN LKK (KENNETH)			Load PDF					

Documents Checklist

DOCUMENTS CHECKLIST

Reset

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There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**Show Remarks To:** ☐ Handling InsurerNote: 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/MSG18018448/KRD3E2

Date: 07/12/2018

REFERENCE

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

Policy No: 29088952TMP

Claimant Vehicle No: SJL6124E

Insured Vehicle No: SJK2365H

Date of Loss: 09/10/2018

Nature of Claim: TP

Claim No: 572646

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SJL6124E

Make & Model: TOYOTA WISH, 1.8 (A)

Reg. Date: 04/12/2008 (Man. Year: 2008)

Colour: Metallic Silver

Engine Capacity: 1794 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

Engine No: 1ZZ3161361

Chassis No: JTDER12W503000996

Odometer: 235149 km

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: 195/65 R15

Rear Tyre Size: 195/65 R15

Front Left Side: Michelin 3 mm

Rear Left Side: Michelin 4 mm

Front Right Side: Michelin 3 mm

Rear Right Side: Michelin 4 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,737.25	2,911.00	1,826.25	38.55
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,830.00	1,930.00	900.00	31.80
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	7,567.25	4,841.00	2,726.25	36.03
Approved Total (Overridden) (S\$)		3,850.00		
(S\$)	7,567.25	3,850.00	3,717.25	49.12
+ GST 7.00/7.00% (S\$)	529.71	269.50	260.21	49.12
Nett Amount (S\$)	8,096.96	4,119.50	3,977.46	49.12

INSPECTION

Date of Assignment: 10/10/2018

Date Inspected: 12/10/2018 Inspected At:

Sin Ming Autocare BFG Pte Ltd (HQ)
176, Sin Ming Drive #02-05, Sin Ming
Autocare Complex
Singapore 575721

Estimated Period of Repair: 6.0 days

Adjuster: KENNETH KONG**Manager:** Janice Lee Si Hua

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: 07 Dec 2018)
Parts: M1-MPV	TOYOTA WISH 1.8 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code: (Unsubmitted, no print-code for SJL6124E)	
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		*TAIL GATE	Bent	1,209.00 FL	*1,209.00 FL
2	1		*TAIL GATE CHROME GARNISH	Serviceable	381.00 FL	*- FL
3	1		*TAIL GATE LOCK	Dented	443.00 FL	*443.00 FL
4	1		*TAIL GATE RUBBER (\$303.00) (50%)	Cut	227.25 FS	*151.50 FS
5	1		*REAR BUMPER	Bent	496.00 FL	*496.00 FL
6	1		*REAR BUMPER SIDE RETAINER - LH	Distorted	60.00 FL	*60.00 FL
7	1		*REAR BUMPER SIDE RETAINER RH	Distorted	60.00 FL	*60.00 FL
8	1		*REAR BUMPER BRACKET LH	Repair	55.00 FL	*- FL
9	1		*REAR BUMPER BRACKET RH	Repair	55.00 FL	*- FL
10	1		*REAR BUMPER SPOILER - LOWER	Cracked	350.00 FL	*350.00 FL
11	1		*REAR END PANEL	Bent	475.00 FL	*475.00 FL
12	1		*REAR END PANEL TOP GARNISH	Dented	245.00 FL	*245.00 FL
13	1		*TAIL LAMP ASSY - RH	Serviceable	497.00 FL	*- FL
14	2		*TAIL LAMP PANEL	Repair	350.00 FL	*- FL
15	1		*EMBLEM	Necessary	68.00 FL	*68.00 FL
16	1		*REAR WINDSCREEN GLASS MOULDING	Necessary	180.00 FL	*180.00 FL
17	1		*TAIL LAMP ASSY - LH	Serviceable	497.00 FS	*- FS
18	1		*TUBE REAR WINDSCREEN GLASS SEALANT	Necessary	25.00 FS	*25.00 FS
19	1		*SET REVERSE SENSOR	Serviceable	250.00 FS	*- FS
20	1		*WEEKEND PLATE SEAL	Necessary	30.00 FS	*30.00 FS
21	1		*WEEKEND SEAL	Necessary	15.00 FS	*15.00 FS

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

Sub Total (\$\$)	5,968.25	3,807.50
- List Item Discount on L Items 25.00/25.00% (\$\$)	1,231.00	896.50
Total Parts (\$\$)	4,737.25	2,911.00

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	TO CHECK WATER SEEPAGE	New	100.00	20.00
2	TO PANEL BEATING ALL AFFECTED AREAS	New	1,000.00	700.00
3	TO PUTTY & SPRAY PAINT ON ALL AFFECTED AREAS	New	1,200.00	900.00
4	TO APPLY ANTI-RUST	New	80.00	60.00
5	TO CHECK WIRING	New	80.00	20.00
6	TO REMOVE & REINSTALL REVERSE SENSOR	New	100.00	50.00
7	TO REMOVE & REINSTALL REAR WINDSCREEN GLASS	New	120.00	120.00
8	TO REMOVE & REFIX INTERNAL UPHOLSTERY	New	150.00	60.00
Gross Labour Cost (S\$)			2,830.00	1,930.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >