

ASS. REC. BY:

REF:

CS/CTI/8018539 / Nsd3ep

Special Instruction:

Surveyor:
Mummen

Naz

ASSIGNMENT (Office)

From (Person):

Chong Boon Sen

of

CTI

Date/Time:

12/10/18 @ 11:42pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

GBA 9845R

Insured:

SLK 8084E

at Workshop m/s

Connect 3

Tel:

9850 9666

of

7 old loh truck Rd

Policy No:

DMPCSN3053601700

Claim No:

8NM18D04750C02

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

02/10/2018

Insp: 566 woodlands Rd @ 15/10/18 @ 10:00

CA / REV / REP. / REV 24 HRS

lup

H.O.D. Endorsement:

Date/Time:

12:02pm @ 12/10/18

Person Contacted:

Winnie

Vehicle IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	GBA 9845R - X
	SLK 8084E - X
11/01/19	checked with Winnie (Gepam?), vehicle has not set in for repair.

108.10.10

REF:

CTI

Surveyor: NAZ

ASSIGNMENT

From:

Date:

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.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

4

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

GBA 9845 R

Yr Regn: 12 MAY 2008

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

Truck / Trailer or

Make:

NISSAN CABSTAR

C.G. 2,953

Colour

WHITE

A/C: Insured / Std / NI / NA

Sp. Reading

283,163

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JN1SC2F2420800320

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

195 R15C

R:

195 R13C

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

TOYO / YOKO or

HI-FLY

Front

Rear

R/Bal.

5

mm

R/Bal.

5

5

mm

L/Bal.

5

mm

L/Bal.

5

5

mm

D.O.A.

2/10/18

D.O.A.

15/10/18

Survey held at

CONNECT 3

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

N/S FRT

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

Date / Time

Action / Instruction

NAZ

PLS see my remarks.

RECEIVED 14 JAN 2019

CTI 6/5

Date/Time, File Pass to?

14/01/19

1)

Date/Time, File Return to?

2)



Preli. Report



Final Report

Days Of Repair:

4

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

S + RS. SI

Photos

Others

Report Format:

Preli.

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

TOTAL

220

220

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

CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	11 Oct 2018		12 Oct 2018 11:42 Assign				New Assignment Cancel Case

Main

Reference

Claim Details

Documents

[Show All](#)

CLAIM SUBFOLDER DETAILS

[Created by insurer]

Insured:	TAN HENG LEE, ID: S8707694F		
Main Claimant:	A.B.T. BUS TRANSPORT SERVICE, Co. Reg. No.: NA		
Vehicle Reg. No.:	GBA9845R	Date of Loss:	02/10/2018 12:00 - :59
Claim Type:	TP / SNM18D04750C02	Policy/Cover Note No.:	DMPCSN3053601700 (Comprehensive)
Vehicle Reg. No. (Insured):	SLK8084E	Policy No. (Claimant):	M497078
		Excess:	S\$0.00
Repairer:	Connect 3 (HQ) 7 OLD TOH TUCK ROAD, 597648 Bukit Batok - Tel:		
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]		
Claimant's Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100		
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 23/10/2018]		
Driver/Custodian (Insured):	TAN HENG LEE (31 / Male), NRIC: S8707694F		
Adj Asg. Remarks:	NO EST, ASSIGN KENNETH KONG AS 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.									

Lucas Lee

From: Winnie Chai <connect3winnie@gmail.com>
Sent: Wednesday, 10 October, 2018 3:05 PM
To: Claims Dept of CTI
Subject: Request for pre repair inspection for accident involving GBA9845R & SLK8084E (yr insured) on 02/10/18
Attachments: GBA9845R_02102018.pdf

Afternoon

I have attached the GIA for yr ref.

Pls kindly assign yr surveyor down for the survey.

Thanks

--
Winnie Chai
Connect3
HP:9850-9666

This email has been scanned by the Symantec Email Security.cloud service.
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Shirley Hiew (LKK Auto)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Monday, 26 November 2018 4:21 PM
To: 'Chong Boon Sen'; SUR
Cc: assignments
Subject: RE: Urgent REMINDER : Yr ref : SNM18D04750C02 (GBA9845R)

Dear Boon Sen,

Thank you for the email.

Dear Shirley,

Kindly assist

FYNA Our Ref : CS/CTI18018539/Nsd3

BEST REGARDS,

G.Nivitha | Admin

LKK Auto Consultants Pte Ltd

Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>
Sent: Monday, 26 November 2018 3:38 PM
To: Winnie Chai <connect3winnie@gmail.com>
Cc: Admin A <admin-a@lkkauto.com>
Subject: RE: Urgent REMINDER : Yr ref : SNM18D04750C02 (GBA9845R)

Without Prejudice

Dear Winnie,

We refer to the above matter.

Liability is in favor of your client and we agree to go for Direct Settlement, subject to consistency of damages, based on our appointed surveyor's findings, with supporting documents.

Aside to M/s LKK, please upload your report and bill for services rendered in Merimen at your earliest convenience.

Thank you.

Regards,

Chong Boon Sen

Claims Executive

Claims

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower

Singapore 079909

Co. Reg. No. 200208384E

DID: 63896171

Fax: 62247175

Email: boonsen.chong@sg.cntaiping.com

Website: www.sg.cntaiping.com

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From: Winnie Chai [<mailto:connect3winnie@gmail.com>]

Sent: Monday, 26 November, 2018 8:29 AM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>

Subject: Urgent REMINDER : Yr ref : SNM18D04750C02 (GBA9845R)

Morning Boon Sen

Pls kindly advise on liability for this case.

Thanks

On Thu, Nov 22, 2018 at 2:55 PM Winnie Chai <connect3winnie@gmail.com> wrote:

Hi Boon Sen

FYA

Thanks

On Thu, Nov 22, 2018 at 2:53 PM Chong Boon Sen <boonsen.chong@sg.cntaiping.com> wrote:

Without Prejudice

Dear Winnie,

Pls provide estimate for our further assistance.

Thank you.

Regards,

Chong Boon Sen

Claims Executive

Claims

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower

Singapore 079909

Co. Reg. No. 200208384E

DID: 63896171

Fax: 62247175

Email: boonsen.chong@sg.cntaiping.com

Website: www.sg.cntaiping.com

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From: Winnie Chai [mailto:connect3winnie@gmail.com]

Sent: Thursday, 8 November, 2018 11:37 AM

To: Chong Boon Sen <boonsen.chong@sg.cntaiping.com>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>

Subject: 3rd REMINDER : Yr ref : SNM18D04750C02 (GBA9845R)

Morning Boon Sen

Pls kindly advise on liability for this case.

Thanks

On Tue, Oct 30, 2018 at 4:03 PM Winnie Chai <connect3winnie@gmail.com> wrote:

Hi Boon Sen

Pls kindly revert on the offer.

Thanks

On Sat, Oct 27, 2018 at 9:50 AM Winnie Chai <connect3winnie@gmail.com> wrote:

Morning Boon Sen

Pls kindly advise on liability for this case.

Thanks

On Mon, Oct 22, 2018 at 1:12 PM Winnie Chai <connect3winnie@gmail.com> wrote:

Afternoon Boon Sen

We ref to yr ref no.

Pls kindly revert on the liability for this case.

I have attached the CCTV for yr ref.

Thanks

--

Winnie Chai

Connect3

HP:9850-9666

--

Winnie Chai

Connect3

HP:9850-9666

--

Winnie Chai

Connect3

HP:9850-9666

--

Winnie Chai

Connect3

HP:9850-9666

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--

Winnie Chai

Connect3

HP:9850-9666

--
Winnie Chai
Connect3
HP:9850-9666

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www.avg.com

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

ACCIDENT STATEMENT

Date Of Report	03/10/2018 13:17
Date Of Accident	02/10/2018 12:50
Exact Location Of Accident	SOON LEE STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA9845R
Insured/Policyholder	
Name Of Registered Owner	A.B.T. BUS TRANSPORT SERVICE
Co Reg No	NA 52897282X
Email Address	WILSON@ECOLIGHTINGENG.COM
Mobile Phone No	(LOCAL) +65-96432322
Alternative Phone No	OFFICE-96432322

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	M497078
Cover Note Number	

Driver

Name of Driver	ANG ZI JIAN
NRIC No	S8437639F
Date Of Birth	16/11/1984
Occupation	OUTDOOR
Date Of Driving Pass	17/03/2005
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96432322
Fax Number	
Contact Number	OFFICE-96432322
Email Address	WILSON@ECOLIGHTINGENG.COM

Address	BLK 257 BOON LAY DRIVE #10-507
Postcode	640257
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	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

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLK8084E
Vehicle Make/Model/Colour	VOVLO - BLUE COLOR
Details Of Properties	RIGHT FRONT PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	NA
NRIC/Passport Number	
Contact Number	NA
Address	NA
	NA
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

① GBA 9845

② SLK 8084E

Soon Lee Street

Double yellow line



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was turning into Soon Lee Street to make a turned around when veh B without giving Signal drove out in a dangerous manner and hit onto my veh left hand corner.

* Third party vehicle B SLK 8084E was stationary when he suddenly drove out and hit my vehicle.

Please See video attached.

DECLARATION

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

Polineholder's Signature
Date: 3/10/2018

Driver's Signature
Date: 3/10/2018

Reporting Officer's Signature
Date: 3/10/2018

Sketch Plan #2

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 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. 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):
- (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:
SAC IT 1000

3/10/2018

CONNECT 3

566 Woodlands Road (Mandai Estate) Singapore 728697

Tel: (65) 9850-9666 Email: Connect3winnie@gmail.com

R o c : 5 3 3 6 0 0 6 1 L

QT18/GBA9845R/TPC-324

China Taiping Insurance (Singapore) Pte Ltd

3 Anson Rd #15-02

Springleaf Tower

Singapore 079909

QUOTATION

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:

Dear Sir,

Cost of Repair to Vehicle GBA9845R

With reference to the above-mentioned, we are pleased to quote as follows:-

No.	DESCRIPTION	QTY	U/PRICE (S\$)	AMOUNT (S\$)
1.	Front bumper	1	903.10	903.10
2.	Front bumper reinforcement	1	480.00	480.00
3.	Front LH corner panel	1	380.00	380.00
4.	Front LH headlamp under cover	1	162.50	162.50
5.	Front Absorber	2	270.00	540.00
6.	Front LH passenger door	1	1,575.00	1,575.00
7.	Front LH passenger door hinge	1	180.00	180.00
8.	Apply anti rust	1	80.00	80.00
9.	Transfer door fittings	1	150.00	150.00
10.	Spray painting	1	900.00	900.00
11.	Labour charges	1	1,500.00	1,500.00
12.	Company address sticker	1	20.00	20.00
SUB-TOTAL				S\$6,870.60

Thank you.

Yours faithfully,

Winnie Chai
HP: 9850-9666



NAZ LKK

15/10/18 1030

L/S

4. DAYS

AFTER REPAIR PHOTOS

17/10/18

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















CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	11 Oct 2018		12 Oct 2018 11:42 Edit Adj Rpt	S\$3,968.10 Edit Estimates	S\$3,968.10 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	TAN HENG LEE , ID: S8707694F								
Main Claimant:	A.B.T. BUS TRANSPORT SERVICE , Co. Reg. No.: NA								
Vehicle Reg. No.:	GBA9845R	Date of Loss:	02/10/2018 12:00 - :59 [124 Months and 20 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / SNM18D04750C02	Policy/Cover Note No.:	DMPCSN3053601700 (Comprehensive)						
Vehicle Reg. No. (Insured):	SLK8084E	Policy No. (Claimant):	M497078						
		Excess:	S\$0.00						
Repairer:	Connect 3 (HQ) 7 OLD TOH TUCK ROAD, 597648 Bukit Batok - Tel:								
Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd. (HQ) - Tel: 6389 6111 ... [Handled by Chong Boon Sen]								
Claimant's Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by Muhammad Nazril Bin Abdullah] ... [Final Rpt due 23/10/2018]								
Driver/Custodian (Insured):	TAN HENG LEE (31 / Male), NRIC: S8707694F								
Adj Asg. Remarks:	NO EST, ASSIGN KENNETH KONG AS 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

*GBA9845R (SNM18D04750C02)
[SLK8084E]
TP
A.B.T. BUS TRANSPORT SERVICE
Oct 2 2018 12:00PM
[TAN HENG LEE]
Connect 3

Upload Documents			Upload Photos		Compose New Letter		View		View in Browser	
Video							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print	
1	03/10/18 13:28	Video - Accident [Linked Accident Report Documents]						Load MP4		
							1 per page		<input checked="" type="checkbox"/>	
Assessment Reports							1 per page		<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print	
1	03/10/18 13:33	Accident Statement						Load HTM		
							3 per page		<input checked="" type="checkbox"/>	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)						Thumbnail	Print	
1	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
2	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
3	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
4	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
5	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
6	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
7	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
8	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
9	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
10	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
11	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
12	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
13	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
14	03/10/18 13:27	Accident Photo [Linked Accident Report Documents]						Load JPG	<input checked="" type="checkbox"/>	
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print	
1	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
2	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
3	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
4	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
5	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
6	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
7	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
8	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
9	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	
10	17/10/18 17:32	General View						Load JPG	<input checked="" type="checkbox"/>	

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
11	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
12	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
13	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
14	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
15	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
16	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
17	17/10/18 17:32	General View	 Load JPG	<input checked="" type="checkbox"/>
18	17/10/18 17:32	Odometer Reading	 Load JPG	<input checked="" type="checkbox"/>
19	17/10/18 17:32	Chassis Number	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	China Taiping Insurance (Singapore) Pte. Ltd. (HQ)	Thumbnail	Print
1	12/10/18 11:41	PRS	 Load PDF	
2	12/10/18 11:41	TP GIA	 Load PDF	
3	12/10/18 11:41	OI GIA	 Load PDF	
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	03/10/18 13:30	Sketch Plan [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>
2	03/10/18 13:30	Sketch Plan #2 [Linked Accident Report Documents]	 Load JPG	<input checked="" type="checkbox"/>

Linked Accident Report Documents

Video			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	03/10/18 13:28	Video - Accident	 Load MP4	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	03/10/18 13:33	Accident Statement	 Load HTM	
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
2	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
3	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
4	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
5	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
6	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
7	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
8	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
9	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
10	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
11	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
12	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
13	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
14	03/10/18 13:27	Accident Photo	 Load JPG	<input checked="" type="checkbox"/>
Documentation			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	STA INSPECTION PTE LTD (Boon Lay)	Thumbnail	Print
1	03/10/18 13:30	Sketch Plan	 Load JPG	<input checked="" type="checkbox"/>
2	03/10/18 13:30	Sketch Plan #2	 Load JPG	<input checked="" type="checkbox"/>

Documents Checklist

DOCUMENTS CHECKLIST

Reset

Save

Print

There are no document checklists configured.

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**Show Remarks To:** ☐ 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/CT118018539/NSD3E2

Date: 15/01/2019

REFERENCE

Handling Insurer:	China Taiping Insurance (Singapore) Pte. Ltd.	Policy No:	DMPCSN3053601700
Claimant Vehicle No :	GBA9845R	Insured Vehicle No :	SLK8084E
Date of Loss:	02/10/2018	Nature of Claim:	TP
		Claim No:	SNM18D04750C02

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	GBA9845R		
Make & Model:	NISSAN CABSTAR, 3.0 (M)	Engine No:	ZD30173404K
Reg. Date:	12/05/2008 (Man. Year: 2008)	Chassis No:	JN1SC2F24Z0800320
Colour:	White	Odometer:	283163 km
Engine Capacity:	2953 cc		
Market Value/New Car Price:	N/A		
Sum Insured (\$\$):	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/ R15C	Rear Tyre Size:	195 R13C (D)
Front Left Side:	HIFLY 5 mm	Rear Left Side:	HIFLY 5/5 mm
Front Right Side:	HIFLY 5 mm	Rear Right Side:	HIFLY 5/5 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	4,240.60	2,878.10	1,362.50	32.13
Miscellaneous Items	0.00	0.00	0.00	
Labour	2,630.00	1,090.00	1,540.00	58.56
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (\$\$)	6,870.60	3,968.10	2,902.50	42.25
+ GST 7.00/7.00% (\$\$)	480.94	277.77	203.17	42.24
Nett Amount (\$\$)	7,351.54	4,245.87	3,105.67	42.25

INSPECTION

Date of Assignment:	12/10/2018	
Date Inspected:	15/10/2018	Inspected At: Connect 3 (HQ) 7 OLD TOH TUCK ROAD Singapore 597648
Estimated Period of Repair:	4.0 days	

Adjuster: Muhammad Nazril Bin Abdullah

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.

THE VEHICLE HAS NOT SEND IN FOR REPAIRS.

(REPAIR COST NOT CONCLUDE)

REPAIR DETAILS

Reference

Part Source:	(Last Synchronised: 15 Jan 2019)	
Parts:	N/A	NISSAN CABSTAR 3.0 (M) (Model not available in database)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for GBA9845R)	
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		*FRONT BUMPER	Cracked	903.10 F	*903.10 F
2	1		*FRONT BUMPER REINFORCEMENT	Serviceable	480.00 F	*- F
3	1		*FRONT LH CORNER PANEL	Deformed	380.00 F	*380.00 F
4	1		*FRONT LH HEADLAMP UNDER COVER	Repair	162.50 F	*- F
5	2		*FRONT ABSORBER	Serviceable	540.00 F	*- F
6	1		*FRONT LH PASSENGER DOOR	Deformed	1,575.00 F	*1,575.00 F
7	1		*FRONT LH PASSENGER DOOR HINGE	Serviceable	180.00 F	*- F
8	1		*COMPANY ADDRESS STICKER	Necessary	20.00 FS	*20.00 FS
Total Parts (S\$)					4,240.60	2,878.10

F=Franchise part. S=SpcNett.

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	APPLY ANTI RUST	New	80.00	40.00
2	TRANSFER DOOR FITTINGS	New	150.00	50.00
3	SPRAY PAINTING	New	900.00	400.00
4	LABOUR CHARGES	New	1,500.00	600.00
Gross Labour Cost (S\$)			2,630.00	1,090.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >