

REF: CS1/LAW18020378/Killer

63378700
melody

Special Instruction:

ASSIGNMENT (Office)

From (Person): Heng Xinyi of Seah Ong Date/Time: 09/11/2018
Estimated Cost: _____ Bill to: _____

46: \$13100.00

Third Parties

Claimant:

Surveyor: Premier Appraiser & Choudhury

Workshop: T2 B Inter

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SKG 1960E Insured: 906 67Y

at Workshop m/s T & B Motor Tel: 6498 0756

of Blk 20 Sin Ming Ind Est #01-28

Policy No: LCH.mv/ct/SMTB-70202.17 Claim No: 17-23002 S.ck.x

Sum Insured: _____ Expense: _____

Make of Veh: _____ DOA 06032017

(Client's Record)

SJE
H.O.D. Enforcement/Date

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: 04/11/19 Confirmed with _____ Final Fig _____, _____ days (Red S _____ / _____ %; Original 11 days)

Date/Time: 24/3/19 Submit Final Fig 8200, 10 days (Red \$ 4900, 137%; Original 11 days)

[illegible]

Para(1) : Parts found not replaced	(To highlight <i>R or UB, LR, Etc</i>)
------------------------------------	---

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)
--

Para(3) : Nett Value

Market Value .

Salvage Value :

Nett Value :

Inspected/
Evaluated by:

Fee Charged:

Date _____

Basic & Add	
Transport	
Photos	
Others	
Total	

007

70

1) Date/Time 24/5/19 File Pass to DP/19

2) Date/Time File Return to

3) Date/Time _____ File Pass to _____

4) Date/Time	File Return to
--------------	----------------

5) Date/Time _____ File Pass to _____

6) Date/Time _____ File Return to _____

Catherine Chong (LKK Auto)

From: Xin Yi <xinyi@seahong.com.sg>
Sent: Friday, 9 November, 2018 12:56 PM
To: kennethkong@lkkauto.com; 'Catherine Chong (LKK Auto)'
Cc: 'Chee Kiong'; samson@seahong.com.sg; amanda@seahong.com.sg;
june@seahong.com.sg; Joyce@seahong.com.sg; 'Cheonghoh Law'
Subject: SKG 1960E [Cheonghoh Law file ref: LCH.my/ct/SMTB-70202.17] [Our file ref: 17.23002 S.CK.xy]

Importance: High

Dear Mr Kong,

APPOINTED AS SINGLE JOINT EXPERT

MC / MC SUIT NO. 10660 OF 2017

CLAIMANT: WOOT YAP YIN – OWNER OF SKG 1960E

INSURED: KWEK SWEE MOH (SBG 67Y)

INSURED DRIVER: KWEK AIK CHUAN

ACCIDENT ALONG SERANGOON CENTRAL INVOLVING SBG 67Y AND SKG 1960E ON 06.03.2017

1. We act for AXA Insurance Singapore Pte Ltd, the insurer of motor vehicle no. SBG 67Y at the material time of the abovesaid accident.
2. M/s Cheonghoh Law Corporation acts for the Plaintiff.
3. Please be informed that parties agreed for your Mr Kong Seng Cheong as the Single Joint Expert for this action.
4. Kindly note that as a Single Joint Expert appointed by the Court, your duty is to the Court to give a fair and reasonable opinion of the Plaintiff's claim and to assess the respective surveyor's reports.
4. We enclose herewith a copy of our client's survey reports for your attention. Copies of all the relevant documents can be downloaded via <https://1drv.ms/b/s!AtyQ5g-oo66hiK1wiMOKIVEsRyDRpg>.
5. We trust that the Plaintiff's solicitor, Ms Cheonghoh Law will forward their client's surveyor's report and photographs to you.
6. Kindly let us have a copy of your SJE report in due course. Thanks v much !

cc Solicitors for the Plaintiff

Name: **M/S CHEONGHOH LAW COPORATION**
File ref: LCH.my/ct/SMTB-70202.17

Thanks & Best Regards

Heng Xinyi

(Secretary to Mr Tan Chee Kiong)

Seah Ong & Partners LLP

36 Robinson Road

#12-03 City House

Singapore 068877

Tel: 6536 5369

Fax: 6536 5811

This message is intended for the recipient named above. It may contain confidential or privileged information. If you are not the intended recipient, please notify the sender immediately by replying to this message and then delete it from your system. Do not read, copy, use or circulate this communication. Thank you.

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Cheonghoh Law Corporation

(Incorporated with limited liability) Blk 53 Chin Swee Road #03-05 . Singapore 160053
Co. Reg No.201138070G Tel: 63378700 Fax: 63373700 E-mail: mail@cheonghoh.sg

In reply please quote our Reference Number
Our Ref: LCH.my/MTB-70202.17

30 March 2017

WITHOUT PREJUDICE

BY HAND

CERTIFICATE OF POSTING

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

Kwek Swee Moh
Blk 35 Kovan Road
#17-45
Singapore 545019

Kwek Aik Chuan
Blk 35 Kovan Road
#17-45
Singapore 545019

Attn: Motor Claims Dept.
(Vehicle No. SBG 67 Y)

Dear Sirs

3019039544---



TRAFFIC ACCIDENT INVOLVING YOUR/YOUR INSURED'S VEHICLE SBG 67 Y AND SKG 1960 E ON 6 MARCH 2017 AT 2:45 PM ALONG/AT SERANGOON CENTRAL TOWARDS SERANGOON GARDEN

We act for the claimant **Woot Yap Yin**, the owner of the above said motor vehicle no. **SKG 1960 E**.

We are instructed to claim damages against you/your driver/your insured in connection with the above-captioned accident involving our client's vehicle registration number **SKG 1960 E** and vehicle registration number **SBG 67 Y** driven by you/your driver/your insured at the material time.

We are instructed that the accident was caused by you/your driver's/your insured's negligent driving and/or management of motor-vehicle **SBG 67 Y**. As a result, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as stated in Part 1 of the Annexure.

A copy each of the supporting documents as stated in Part 2 of the Annexure is enclosed.

We have on 7 March 2017 notified your insurer (abovenamed addressee) of the accident and a pre-repair survey of our client's vehicle was carried out by your insurer on 9 March 2017 and 13 March 2017 as your insurers rejected our proposed list of surveyors on 9 March 2017.

Please note that:

- (a) if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer;
- (b) you or your insurer should send to us an acknowledgment of receipt of this letter within 14 days of your/your insurer receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer;
- (c) if you have a counterclaim against our client arising out of this accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

For the avoidance of doubt, unless otherwise indicated, this letter of claim is sent to the abovenamed addressees.

Yours faithfully

Lee Cheong Hoh
Cheonghoh Law Corporation

enc.: supporting documents in paragraph 4 enclosed in covering letter to insurers only
cc: client (via email /fax only) - SKG 1960 E

RECEIVED
03 APR 2017

ANNEXURE

Part 1 - particulars of loss and expense

Cost of repairs	\$13,100.00
Rental @ 14 days	1,680.00
Survey Report	966.00
GIA Reports/LTA, RCB searches	37.00
Others	0.00
Incidentals	50.00
Costs Contribution	1,000.00
TOTAL	<u>\$16,833.00</u>

Part 2 - list of supporting documents enclosed in the letter of claim.

LTA search

GIA reports/Police reports & type-written transcripts

repairer's bill and evidence of payment (if any)

surveyor's report

photocopies of photos of damages to claimant's vehicle

rental agreement, invoice/receipt

the insurer has been notified of the accident and allowed to carry out a pre-repair inspection of claimant's vehicle

supporting documents for all other expenses claimed (if any)

correspondences with the defendant's relating to pre-repair survey and/or post repair inspection of the claimant's vehicle

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 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	07/03/2017 22:11
Date Of Accident	06/03/2017 14:45
Exact Location Of Accident	SERANGOON CENTRAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG1960E
Insured/Policyholder	
Name Of Registered Owner	WOOT YAP YIN
NRIC No	S0076663A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96196663
Alternative Phone No	Office-96196663

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Third Party
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	AXA Insurance Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA139237/1
Cover Note Number	

Driver

Name of Driver	NG HUI HUI
NRIC No	S8707110C
Date Of Birth	19/03/1987
Occupation	Indoor
Date Of Driving Pass	13/06/2009
Driving Experience	7 Years And 8 Months
Gender	Female
Mobile Number	(Local) +65-81687037
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 660C JURONG WEST ST 64 #12-360
Postcode	643660
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Relative
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 (TP Hit Insured)
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	Yes
Was any other material or property damaged?	Yes
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	No
Number of Passengers (Including Driver)	2

Details of Police Action

Was the accident reported to the police?	Yes
If Yes, Please state which Police Station	
Police Station Name	Thomson Neighbourhood Police Post
Police Station Address	ROAD: Blk 25 Sin Ming Road , POSTCODE: 570025 , COUNTRY: Singapore
Police Station Contact	TEL NO: 1800-4529999 - FAX NO: 6 5535740
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT.

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	SBG67Y
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name NG HUI HUI
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKG1960E
Were seat belts worn? Yes
Was injured conveyed to hospital by ambulance? No
Address
Postcode

DETAILS OF INJURED PERSON 2

Name WANG YI HUI
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKG1960E
Were seat belts worn? Yes
Was injured conveyed to hospital by ambulance? No
Address
Postcode

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 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.

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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: SKG1960E
B: SBG 67Y

Describe Circumstances of the Accident

ON 6 MAR 2013 AT ABOUT 1445HOURS, I WAS DRIVING ALONG SERANGOON CENTRAL TOWARD SERANGOON GARDEN.


THE TRAFFIC WAS MODERATE THE VEHICLE IN FRONT OF ME SLOW DOWN AND I FOLLOWED. SUDDENLY, I FELT A STRONG IMPACT FROM BEHIND THEN MY VEHICLE WAS PUSH FORWARD. I CAME DOWN TO CHECK AND REARWAS A RED COLOUR VEHICLE HIT MY VEHICLE REAR. THE DRIVER CAME DOWN TO EXCHANGE PARTICULAR WITH ME. THERE WAS NO PASSENGER IN HIS VEHICLE. I GOT A PASSENGER WALK WITH HIM, IN MY CAR AND SUFFER INJURIES DUE TO THE ACCIDENT. I ALSO INJURED DUE TO THE ACCIDENT.

* Vehicle repair at my own workshop

Declaration

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

7/3/12 @ 3:30pm

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20170307/2114

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

1 of 4

Report No. T/20170307/2114

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/03/2017 15:03		Vide Report No.:	Station Diary No.: 36
Informant's Particulars			
Name of Informant: NG HUI HUI		Address: APT BLK 660C JURONG WEST STREET 64 #12-360 SINGAPORE 643660	
ID Type / ID No.: NRIC NO / S8707110C		Contact No.: Home/Office: Mobile: 81687037	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 29	Date of Birth: 19/03/1987	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: SALES MARKETING		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2017 14:45	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 SERANGOON CENTRAL SERANGOON GARDEN WAY				
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
SBG67Y	Car				Slightly Damaged	0
SKG1960E	Car				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20170307/2114

2 of 4

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

Report No. T/20170307/2114

CONTINUATION OF REPORT

Driver			
Name	Kwek Aik Chuan	ID No.	S7638399E
Related Vehicle	SBG67Y (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	NG HUI HUI	ID No.	S8707110C
Related Vehicle	SKG1960E (Car)	Contact No.	81687037
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	07/03/2017	Date Discharge	NIL
No. of Days granted Medical Leave	08	Degree of Injury	Slight
Passenger			
Name	Wang Yi Hui	ID No.	S9120421E
Related Vehicle	SKG1960E (Car)	Contact No.	NIL
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	07/03/2017	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On 06/03/2017 at about 2.45pm, I was driving along my car (SKG1960E) along Serangoon Central towards Serangoon Garden. The traffic was moderate on that day. I notice that the car in front of me slowed down, as such I follow suit. As I was slowing down, I felt a strong impact coming from the rear which cause my car to move forward. I had one passenger with me in the car.

I then alight my car to make a check and discover that the car (SBG67Y) behind me had hit onto the rear portion of my car. The driver of the said vehicle also alight his car and exchange particulars with me.

Today after the accident my passenger and I felt unwell and went to Singapore General Hospital to seek medical treatment and I was given 8 days hospitalisation leave. My passenger was given 4 days hospitalisation leave.



**SINGAPORE
POLICE FORCE**



T/20170307/2114

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

3 of 4

Report No. T/20170307/2114

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20170307/2114

4 of 4

Report No. T/20170307/2114

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

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:
E /
Sgt MUHAMMAD RIDZUAN BIN ABDUL
RAHMAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
Sr Staff Sgt ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp

NP188

Signature

Singapore Police Force

Signature Of Informant:

Date/Time:
07/03/2017 15:03

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 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	06/03/2017 17:03
Date Of Accident	06/03/2017 14:45
Exact Location Of Accident	ALONG SERANGOON CENTRAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBG67Y
Insured/Policyholder	
Name Of Registered Owner	KWEK SWEE MOH
NRIC No	S0574237D
Email Address	WILKWEK@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97357335
Alternative Phone No	Others-98770007

Vehicle Particulars

Manufacturer	JAGUAR
Model	XF 3.0SC TSS
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?	Yes
If No, Please state action to be taken	
Vehicle Category	Private Car

Insurance Company

Name of Insurance Company	AXA Insurance Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	GA000906/1
Cover Note Number	03/01/2017 - 02/01/2018

Driver

Name of Driver	KWEK AIK CHUAN
NRIC No	S7638399E
Date Of Birth	20/11/1976
Occupation	Indoor
Date Of Driving Pass	31/03/1998
Driving Experience	18 Years And 11 Months
Gender	Male
Mobile Number	(Local) +65-98770007
Fax Number	
Contact Number	
EMail Address	WILKWEK@HOTMAIL.COM

Address	35 KOVAN ROAD #17-45 KOVEN MELODY
Postcode	545019
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 (Insured Hit TP)
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	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 TO THE ATTACHED SKETCH PLAN BY DRIVER.

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	SKG1960E
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	NG HUI HUI
NRIC/Passport Number	S8707110C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

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.
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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.
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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

Date: 6/3/17 Time: 1445 Location: Serangoon Central

My Vehicle A: SP5677 Vehicle B: SK6196D E Vehicle C / Others _____

As I was driving along Serangoon Central, vehicle B suddenly
Jam brake as a Taxi - intent swive from Right to Left Lane
Suddenly - Resulting in a collision.

Type: Own Damage claim at his own workshop

- () Claim OD/TP at Ah Lim Motor (X) Claim OD/TP at other workshop
() Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop: SZE KANG AUTOMOBILE
email address: szekang@sinnet.com.sg
& myself: wilkwole@hotmail.com
email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

Declaration

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

Witnessed by Reporting Centre Personnel



To Whom It May Concern,

Accident involving my vehicle no. SBG 67 Y on 6/3/17 (date) with
SKG 1960 E (other vehicle no) along Serangoon Central

I, KWEK SWEE MOH Nric No. S 0574237 D

Owner of vehicle no. SBG 67 Y am aware of the accident of my vehicle on
6/3/17 (Date) while car was driven by KWEK ANE CHUAN

Nric No. S 7638399 E. I hereby, authorise him / her to make the report.



Name KWEK SWEE MOH

Date: 6/3/17

.....
..

To fill in if there is a OD claim

I am aware of the circumstances and agreeable to claim my own insurance for the
above accident.



Name KWEK SWEE MOH

Date: 6/3/17

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7638399E



Name
KWEK AIK CHUAN
(GUO YICHUAN)
郭一川
Race
CHINESE
Date of birth
20-11-1976 Sex
M
Country of birth
SINGAPORE

J/C38399E



Driver

Owner

HP: 9777 0007 | 9735 7325

Email: wilkwek@hotmail.com



3964787



NRIC No: S7638399E

Date of issue
24-11-2006

35 KOVAN ROAD #17-45
KOVAN MELODY SINGAPORE 545019
NRIC No: S7638399E Date: 08/12/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

CLASS DATE

Class 2 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 31 Mar 1998



NP 428A



redefining / insurance

AXA Insurance Singapore Pte Ltd
 1800 680 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

Certificate of Insurance

account number
 04242

-Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	KWEK SWEE MOH	Certificate number	GA000906 / 1
Cover	Comprehensive	Chassis number	SAJAC06A6D6S70662
Plan name	Flexi*	Engine number	12111112554306PS
NCD applicable	50%		
Vehicle registration number	SBG67Y		
Period of insurance	from 03/01/2017 to 02/01/2018 (both dates inclusive)		
Finance loan company	JCWC CREDIT (S) PTE LTD		

Persons or classes of persons entitled to drive*

- (a) The Policyholder
 (b) Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

* Limitations rendered inoperative by Section 2 of the Motor Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS Windscreen Excess

Not Applicable

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and inexperienced Driver*
3. S\$5,000 for undeclared *Young and inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

(We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA Insurance Singapore Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation) Act (Cap. 189). The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

Ah Lim Motor Company
10, Ang Mo Kio Industrial Park 2A
#01-09 AMK Autopoint
Singapore 568047

Date: 6 / 3 / 17

To: Owner of Vehicle Number: SBG 677

The following has been advised to you via AXA Authorised workshop, Ah Lim Motor Company through their staff, Zila / Eileen / Mui Hong.

Please tick the applicable box if you had been advice on the content as seen below:

☒ You had been advised by the workshop that in the event that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

☐ You had been advised by the workshop on the liability and merits of the case accordingly.

☐ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.

☐ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.

☐ The Estimation waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.

☐ You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.

☐ For vehicles below Three (3) years old, your Insurance company will use only genuine original parts to repair your vehicle.

For vehicles above Three (3) years old, your insurance company will be carrying out repairs using **any combination** of genuine original parts and/or original equipment manufacturer (OEM) parts.

☐ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.

☒ As you have opted to repair your car and claim via your own workshop, please check with your own workshop on the claim procedures, liability & merits of the case.

☐ If opt to claim third party at AXA authorised workshop instead, AXA will grant you up to 30 days to revert to own damage claim should your TP claim be not successful.

☐ Others: _____

Signed and acknowledge by:


Name and signature of policyholder/ authorised driver


Name and signature of Workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**GENERAL
INSURANCE
ASSOCIATION**

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-17-033145

Date of Request: 08/03/2017

Your Ref No: LCH.MY/SMTB-70202.17

CHEONGHOH LAW CORPORATION
53 Chin Swee Road #03-05
Singapore 160053

Dear Sir/Madam,

Date of Accident: 06/03/2017

Vehicle No: SKG1960E

Place of Accident: SERANGOON CENTRAL

Involving Vehicle No: SBG67Y

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SBG67Y	SERANGOON CENTRAL	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

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.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



**GENERAL
INSURANCE
ASSOCIATION**

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-17-033140

Date of Request: 07/03/2017

Your Ref No: LCH.MY/SMTB-70202.17

CHEONGHOH LAW CORPORAT ON
53 Chin Swee Road #03-05
Singapore 160053

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 06/03/2017

Place of Accident: SERANGOON CENTRAL

Client Vehicle No: SKG-960E

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

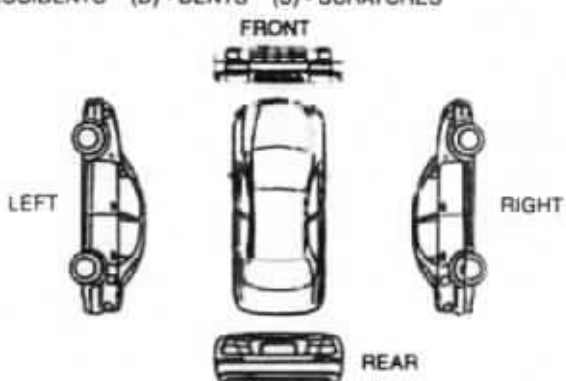
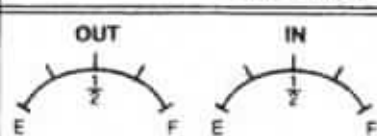
Date:

☒ GIRO ☐ Cash ☐ Cheque

SUN CAR RENTAL Reg No. 53127106D
Blk 20 Sing Ming Road #01-28 Singapore 575678
Office: Tel: 64580296 / 64548007 Fax: 65542640

VEHICLE RENTAL AGREEMENT

NO.0281

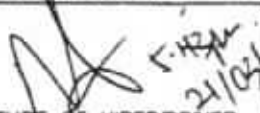
HIRER'S PARTICULAR Name: (as in IC) <u>NH HUI HUI</u> NRIC / PASSPORT No: <u>S8707110/C</u> Address (Res): <u>660C JURONG WEST ST 64</u> <u>#12-360 S 643660</u> Name & Address of Employer _____ Occupation: <u>SALES & MARKETING</u> Driving Exp: <u>7+ YEARS</u> D/L No: <u>S8707110C</u> D/L Type: <u>(Local) International</u> Pass Date: <u>13 JUN 2007</u> Date of Birth: <u>14 MAR 1987</u> Tel: (O) <u>81659037</u> (R) _____ HP / PG: _____		Vehicle No: <u>3K47217</u> Replace Veh No: <u>3K41960</u> Mileage Out: _____ Mileage In: _____ Make & Model: _____ Renting Location _____ Auto / Manual _____ OUT Date <u>8 Mar 17</u> Time: <u>4.45pm</u> HIRE / PERIOD EXPIRY _____																																									
ADDITIONAL DRIVER'S PARTICULARS Name: (as in IC) <u>BENJAMIN YONG JIEH MUN</u> NRIC / PASSPORT No: <u>S8743684E</u> D/L No: <u>S8743684E</u> D/L Type: <u>(Local) International</u> Pass Date: <u>26-10-2007</u> Date of Birth: <u>27/04/1987</u> Occupation: <u>Nil</u> Driving Exp: <u>97</u>		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="center" colspan="4">RENTAL CHARGES</th> </tr> <tr> <td>Daily 14 @ \$ 120</td> <td>\$1680</td> <td>00</td> <td></td> </tr> <tr> <td>Weekly @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Monthly @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hours @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Others @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CDW @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>PAI @ \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Delivery Service</td> <td></td> <td></td> <td></td> </tr> <tr> <td align="right" colspan="2">SUB-TOTAL \$</td> <td>1680</td> <td>00</td> </tr> </table>		RENTAL CHARGES				Daily 14 @ \$ 120	\$1680	00		Weekly @ \$				Monthly @ \$				Hours @ \$				Others @ \$				CDW @ \$				PAI @ \$				Delivery Service				SUB-TOTAL \$		1680	00
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PAI @ \$																																											
Delivery Service																																											
SUB-TOTAL \$		1680	00																																								
Refundable Deposit: _____ Cash/Nets/Cheque/VISA/MC Cards No _____ (A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES <div style="text-align: center;">  </div>		<div style="text-align: center;">  </div> EXTENSION _____ Collection Service _____ Misc. _____ ESTIMATED TOTAL RENTAL \$ _____ Sales Person Code: _____ Hirer is responsible for the first \$ <u>2500</u> excess for collision / damage to first party (i.e.) IR CAR RENTAL PTE LTD Vehicle (including windscreen) and also first \$ <u>5,500</u> excess for collision / damage to third party's vehicle for each and every accident / damage. Hirer's Signature <u>[Signature]</u> <u>8 Mar 17</u> Addition Driver's Signature <u>[Signature]</u>																																									
ACCESSORIES CHECK <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S / Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio / Cass <input type="checkbox"/> CD/Cartridges <input type="checkbox"/> S / RIM																																											

We agreed to the terms and conditions above, overleaf and that all information given in true & correct in all respect. My/our driving licence(s) is/are current and not disqualified from driving. You may charge all amount due on the rental to my/our credit card.

IMPORTANT

- ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY IR CAR RENTAL PTE LTD.
- IN THE EVENT OF AN ACCIDENT THE HIRER OR AUTHORIZED DRIVER:
 - shall report all accidents involving the said vehicle to the Owner immediately;
 - shall take immediate steps to complete and sign Form MAR 1 (Motor Accident Report Form) and do all other acts required in compliance with the "NON-INJURY MOTOR ACCIDENT REPORT SCHEME" (the form will be made available when the accident is report to the Owner);
 - shall report to the police within 24 hours from the occurrence, the following types of accidents:
 - injury case;
 - non-injury case involving a Government vehicle or damage to Government property;
 - non-injury case involving a foreign vehicle (to obtain their motor insurance policy, Passport No./Name of the driver, Vehicle number, Log card and Vehicle road tax information);
 - non-injury case involving a pedestrian or cyclist.

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO IR CAR RENTAL PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	DEPOSIT REFUND	
<u>21/03</u>	<u>5.43pm</u>		<u>San He</u>			 SIGNATURE OF HIRER/DRIVER

T & B MOTOR REPAIRS SERVICES PTE LTD

BLK 20 SIN MING ROAD #01-28 SINGAPORE 575678

Tel No. : 6458 0296 / 6454 8007 Fax No. : 6554 2640

E-Mail : tbmotor@hotmail.sg

Buss. Reg. No. : 199001597D

WOOT YAP YIN

BLK336 TAMPINES STREET 32 #06-47B

SINGAPORE 520336

Attention : Motor Claim Department

Final Repair Bill : T1001899

Date : 29/03/2017

Vehicle Num. : SKG1960E

Make/Model : VOLKWAGON SIROCCO

Chassis/Eng# :

Accident Date : 06/03/2017

Claim No. :

Reference :

Policy No. : GA139237/1

Amount S\$

LUMP SUM REPAIRS

INCLUSIVE OF SUPPLYING PARTS AND LABOUR,
PANEL BEATING AND SPRAY PAINTING

13,100.00

SingDollars : Thirteen Thousand One Hundred Only

E. & O.E.

Total S\$:

13,100.00

=====



for T & B MOTOR REPAIRS SERVICES PTE LTD

PREMIER APPRAISER SERVICES

Insurance Loss Adjusters and Qualified Appraisers
16 Sin Ming Walk, #03-02 Singapore 575568
Tel: 6554-2269 Fax: 6459-0269
Regn. No: 52864369W

To Ms. Woot Yap Yin
c/o Bk 20 Sin Ming Ind Est
Sector A #01-28
Singapore 575678

INVOICE NO : PT1703004
Our Ref : PT1703004-L
Your Ref : -
Date : 24th Mar 2017

	AMOUNT
VEHICLE REGISTRATION NO : SKG 1960 E	
VEHICLE MAKE/MODEL : Volkswagen Scirocco 1.4A TSI	
TO SERVICE RENDERED:-	
<input checked="" type="checkbox"/> CONSULTANT/APPRAISER FEES	\$ 730.00
<input checked="" type="checkbox"/> PHOTOGRAPHS	\$ 96.00
<input checked="" type="checkbox"/> TRANSPORT CHARGES	\$ 60.00
<input checked="" type="checkbox"/> RE-INSPECTION FEES	\$ 80.00
	<u>\$ 966.00</u>
DOLLARS :- NINE HUNDRED & SIXTY SIX ONLY	

E & O. E.

for PREMIER APPRAISER SERVICES

PREMIER APPRAISER SERVICES

Insurance Loss Adjusters and Qualified Appraisers
16 Sin Ming Walk, #03-02 Singapore 575568
Tel: 6554-2269 Fax: 6459-0269
Regn. No: 52864369W

Our Ref : PT1703004-L
Date : 24th Mar 2017

Ms. Woot Yap Yin
c/o Blk 20 Sin Ming Ind Est
Sector A #01-28
Singapore 575678

WITHOUT PREJUDICE

Dear Sir,

Re: Third Party Claim / Workshop :- T & B Motor Repairs Services Pte Ltd
Vehicle Regn. No. : SKG 1960 E

We refer to your instruction to appraise the above-mentioned vehicle on 09th Mar 2017.

A static inspection was carried out and our report is enclosed for your perusal. The estimated repair costs submitted by the repairer for **SS 24,066.90** as per our attached schedule have been scrutinized and revised by us against the actual damages found on the vehicle and we recommend the replacements and rectification accordingly.

The repairer has agreed to undertake the repairs at our adjusted amount of **SS\$13,100.00 lump sum** corresponding to supply of parts, labour charges and spraypainting. However, we have not given instruction to authorize.


Under normal circumstances the estimated period of repairs is **ELEVEN (11) days**. Photographs of the damaged vehicle taken by us during our inspection are enclosed.

We are leaving the matter to you for a decision.

Please do not hesitate to contact us if you need any clarification.

Assuring you of our best services always.

Very truly yours
PREMIER APPRAISER SERVICES


LESLIE K C LIM CAE (UK), MIMI (UK)
MSAAA, Automotive Appraiser
Dip.MTM. Automotive Engineer

PREMIER APPRAISER SERVICES

VEHICLE INSPECTION REPORT

To :	Ms. Woot Yap Yin	Our Ref. :	PT1703004-L
	c/o Blk 20 Sin Ming Ind Est	Policy No. :	-
	Sector A #01-28	Claim No. :	-
	Singapore 575678	Sum Insured :	
		Excess :	T/P Claim
		Date :	24th Mar 2017

Assigned By :	Ms. Woot Yap Yin
Date of Assignment :	09th Mar 2017
Date of Accident :	06th Mar 2017
Date of Inspection :	09th Mar 2017 Follow up inspections were also conducted.
Name of Workshop :	T & B Motor Repairs Services Pte Ltd
Place of Inspection :	Blk 20 Sin Ming Ind Est Sector A #01-28 Singapore 575678

PARTICULARS OF VEHICLE

Registration No. :	SKG 1960 E	Odometer/km :	136500
Make/Model :	Volkswagen Scirocco 1.4A TSI	Chassis No. :	WVWZZZ13ZAV432987
Type Of Body :	2 Dr. Coupe	Engine No. :	CAV165332
Year of Manuf./Regn. :	2010	Engine Cap. :	1390 cc
Colour :	White	Carrying Cap. :	3 Passengers

PRE-ACCIDENT CONDITION (Static tests only)

Handbrake :	Serviceable	Body Work :	Good	Market Value :	N/A
Footbrake :	Serviceable	Paint Work :	Good	Scrap Value :	-
Steering :	Serviceable	Modifications :	None	Others :	-

CONDITION OF TYRES

	Size	N/s - Tread Depth/Make	O/s - Tread Depth/Make
Front Tread :	235/40 - R18	6mm - Goodyear	6mm - Goodyear
Rear Tread (inner) :			
Rear Tread (outer) :	235/40 - R18	6mm - Goodyear	6mm - Goodyear

The above represent an estimated remaining life of the tyre treads in mm.

POINT OF IMPACT/GENERAL DESCRIPTION OF DAMAGES

The vehicle sustained an impact of heavy nature on the lower rear portion.

The o/s rear chassis member, tailgate, bootfloor, rear end panel, rear end panel inner structure, rear bumper, bumper reinforcement, exhaust silencer, exhaust centre pipe, rear suspension cross member/axle unit, rear suspension lower arms were dented/ bent/ buckled/ distorted.

For details of damages please refer to our schedule attached.

REMARKS :

This survey was conducted strictly without prejudice.

This report is confidential and is given for the use of clients and their agents and any disclosure or publication of it or parts thereof shall be the responsibility of such person and no liability shall be attached to us therefore.

PREMIER APPRAISER SERVICES

Our Ref: PT1703004-L

Vehicle No: SKG 1960 E

Qty	Parts Descriptions	Conditions	Repairer's Est.	Our Revised
LIST ITEMS:				
1	tail gate	dented - repair	S\$ 1,712.95	S\$ -
1	tail gate inner lock	stiffened	226.80	<i>R</i> 226.80 <i>X</i>
1	tail gate lower lock catch	serviceable	172.20	-
1	tail gate weatherstrip	serviceable	392.70	-
1	tail gate "VW" emblem	damaged	214.40	214.40
1	tail gate "SCIROCCO" emblem	damaged	108.00	108.00
1	tail gate "TSI" emblem	damaged	96.05	96.05
1	o/s taillamp	chafed/damaged	523.00	523.00
1	n/s taillamp	chafed/damaged	523.00	523.00
1	rear end panel	badly dented	962.80	962.80
1	rear end panel garnish	damaged	247.15	247.15
1	rear bumper	badly dented	1,498.10	1,498.10
1	rear bumper reinforcement	badly dented	678.30	678.30
1	rear bumper centre top bracket	damaged	213.35	213.35
1	rear bumper o/s bracket	damaged	143.10	143.10
1	rear bumper n/s bracket	damaged	143.10	143.10
1	rear bumper tow hook cover	damaged	54.55	54.55
1	rear bumper o/s reflector	damaged	85.95	85.95
1	rear bumper n/s reflector	serviceable	85.95	-
1	rear bumper o/s mud cover	damaged	106.90	<i>Sum</i> 106.90 <i>X</i>
1	rear bumper n/s mud cover	serviceable	106.90	-
1	exhaust silencer assembly	badly dented	1,712.80	1,712.80
1	exhaust o/s mounting	damaged	128.75	128.75
1	exhaust o/s mounting bkt	damaged	125.40	125.40
1	exhaust heat shield cover	buckled	250.25	250.25
2	exhaust front mountings	damaged	257.50	257.50
1	exhaust centre pipe	bent	1,499.05	<i>L R</i> 1,499.05 <i>X</i> <i>4005n</i>
1	spare wheel tightening screw	snapped	143.90	<i>Sum</i> 143.90 <i>X</i>
1	rear number plate lamp wire	serviceable	538.85	-
2	rear number plate lamp bulbs	damaged	87.80	87.80
1	rear susp sub-frame / axle	bent/distorted	2,861.05	<i>Sum</i> 2,861.05 <i>X</i>
1	rear susp o/s lower arm	dented/bent	549.70	<i>Sum</i> 549.70 <i>X</i>
1	rear susp n/s lower arm	dented/bent	549.70	<i>Sum</i> 549.70 <i>X</i>
			S\$ 17,000.00	S\$ 13,990.45
		LESS 10%	1,700.00	10% 1,399.05
			15,300.00	12,591.41
S/NETT ITEMS:				
1	rear windscreen sealant	not required	70.00	-
1	rear number plate	damaged	70.00	50.00
1	reverse sensors	damaged	320.00	220.00
1	n/s rear ABS sensor	serviceable	2,346.90	-
	TOTAL S/PARTS		S\$ 18,106.90	S\$ 12,861.41
	To remove/refit rear seat, upholstery, interior trims and garnish to assist repairs. (luggage only)		480.00	120.00
	To remove/refit rear windscreen to assist repairs.		180.00	-
	Balance c/d		S\$ 13,766.90	S\$ 12,981.41

PREMIER APPRAISER SERVICES

Our Ref: PT1703004-L

Vehicle No : SKG 1960 E

	Balance b/f	S\$ 18,766.90	S\$ 12,981.41
Labour charges to repair, panel beat and straighten damaged parts and replace the above-mentioned parts.		1,850.00	1,500.00 <i>1000</i>
To transfer tail gate fittings and components.		120.00	-
To dismantle/replace rear suspension, cross member and lower arms.		1,000.00	<i>~</i> 480.00 <i>X</i>
To check & adjust wheel alignment & steering geometry.		120.00	<i>~</i> 80.00 <i>X</i>
To remove/replace exhaust system including centre pipe.		280.00	180.00 <i>1200</i>
To check wiring functions.		180.00	30.00
Computer diagnose/check & reset ABS & parking sensors.		120.00	120.00
To putty, apply primer & spray-paint the affected areas.		1,200.00	960.00 <i>880</i>
To wash cushion and clean whole vehicle.		250.00	-
To apply rust-proofing on repaired/replaced panels.		180.00	80.00
	TOTAL	S\$ <u>24,066.90</u>	S\$ <u>16,411.41</u>

Note: The repairer has agreed to undertake the repairs at our adjusted amount of **S\$13,100.00 lump sum** corresponding to supply of parts, labour and spray painting charges.
The estimated period of repairs is **ELEVEN (11)** days.
Pursuant to your instruction we have **not** authorised repairs on your behalf.

PREMIER APPRAISER SERVICES

61
LESLIE K C LIM CAE (UK), MIMI (UK)
MSAAA Automotive Appraiser
Dip.MTM. Automotive Engineer

CHOW AUTOMOBILE ASSESSOR & SURVEYOR

299 BUKIT BATOK STREET 22, #02-10,, Singapore 650299.

(Business Reg.No. 282126100K)

Tel: 6294 1864, Fax: 6665 4133

E-mail: chowauto@singnet.com.sg

VEHICLE DAMAGE INSPECTION REPORT

Our File No: C/AXA/M143/17

Date: 11/06/2017

REFERENCE

Handling Insurer:	AXA Insurance Pte Ltd	Policy No:	GA000906
Claimant Vehicle No :	SKG1960E	Insured Vehicle No :	SBG67Y
Date of Loss:	06/03/2017	Nature of Claim:	TP
		Claim No:	C0424156

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SKG1960E	Engine No:	CAV165332
Make & Model:	VOLKSWAGEN SCIROCCO, 1.4 (A)	Chassis No:	WVWZZZ13ZAV432987
Reg. Date:	03/06/2010 (Man. Year: 2010)	Odometer:	136500 km
Colour:	White		
Engine Capacity:	0 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:	Good	Steering (Serviceable):	Yes	Footbrake (Serviceable):	Yes
Handbrake (Serviceable):	Yes	Engine Modification:	No	Pre-accident Condition:	Good

CONDITION OF TYRES

Front Tyre Size:	235/40 R 18	Rear Tyre Size:	235/40 R 18
Front Left Side:	Goodyear 6 mm	Rear Left Side:	Goodyear 6 mm
Front Right Side:	Goodyear 6 mm	Rear Right Side:	Goodyear 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	0.00	0.00	0.00	
Miscellaneous Items	0.00	0.00	0.00	
Labour	0.00	0.00	0.00	
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Nett Amount (S\$)	0.00	0.00	0.00	

INSPECTION

Date of Assignment:	09/03/2017		
Date Inspected:	09/03/2017	Inspected At:	T & B Motor Repairs Services Pte Ltd (HQ) Blk 20, #01-28, Sin Ming Road Singapore 575678
Estimated Period of Repair:	6.0 days		

Adjuster: Chow Cher Pow
Licensed Appraiser

Manager: Chow Cher Pow
Licensed Appraiser

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.

SPECIAL REMARKS

Brakes and steering in order.

Survey was carried out w/o prejudice.

Repairer's did not provide est. cost of repairs.

Vehicle was reinspected on 19/5/17.

Damages : The damage was due to an impact to the Rear portion of the vehicle.

Rear panel bent and dented, rear bumper bent and cut, reinforcement bent, brackets bent, reverse sensor cut, rear exhaust and muffler bent, rear no. plate and holder bent and cracked.

REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 08 Mar 2017)
Parts: M1-COUPE VOLKSWAGEN SCIROCCO 1.4 (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's (Price-denominated Standard List)
Print Code: Chow Automobile Assessor & Surveyor/SKG1960E/11/06/2017 16:37
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

There are no new parts selected.

Chow Automobile Assessor & Surveyor/SKG1960E/11/06/2017 16:37. Not valid without Reference section.

Recommended Miscellaneous Items

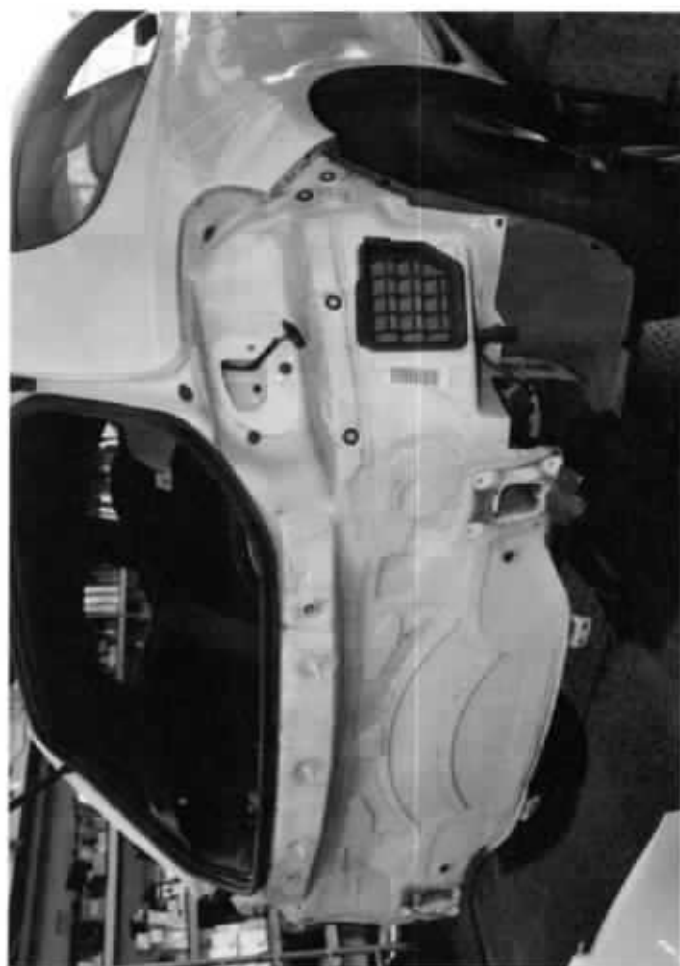
There are no new miscellaneous items selected.

Recommended Labour

There are no labour items selected.

Chow Automobile Assessor & Surveyor/SKG1960E/11/06/2017 16:37. Not valid without Reference section.
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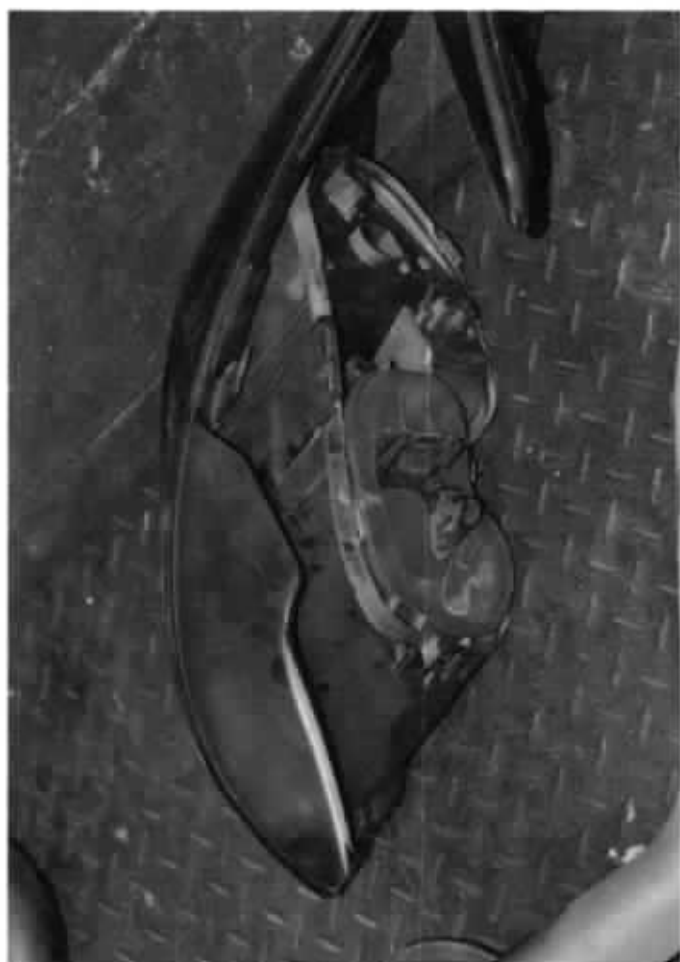
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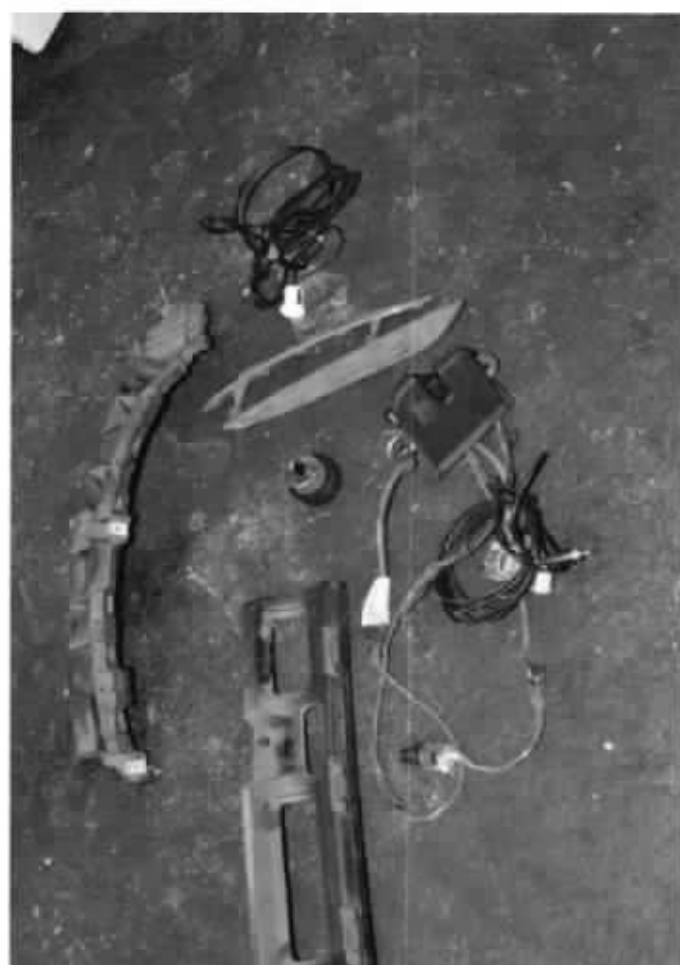
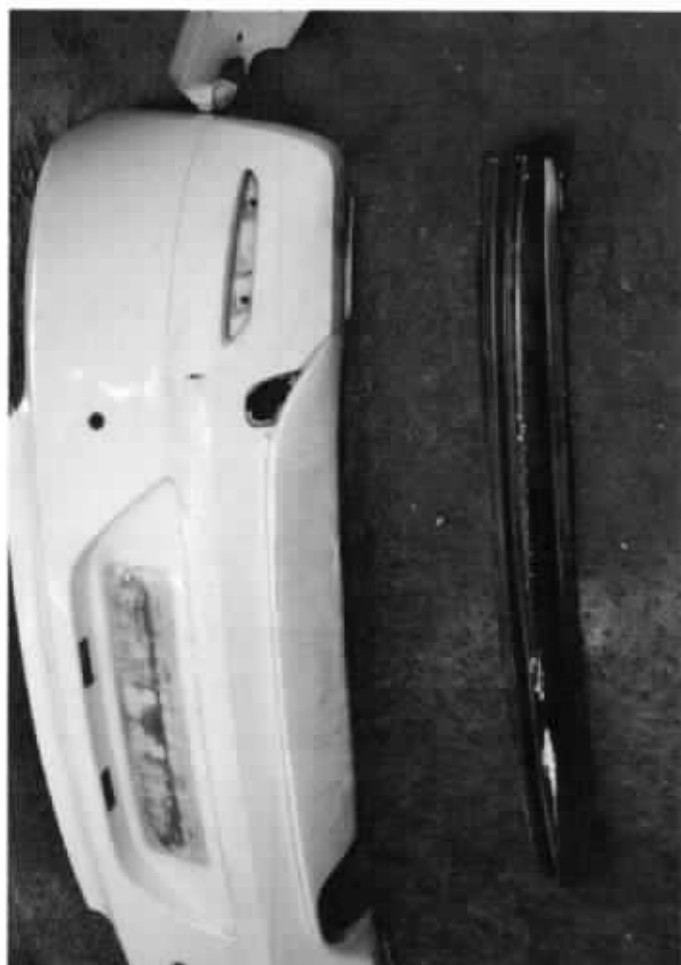




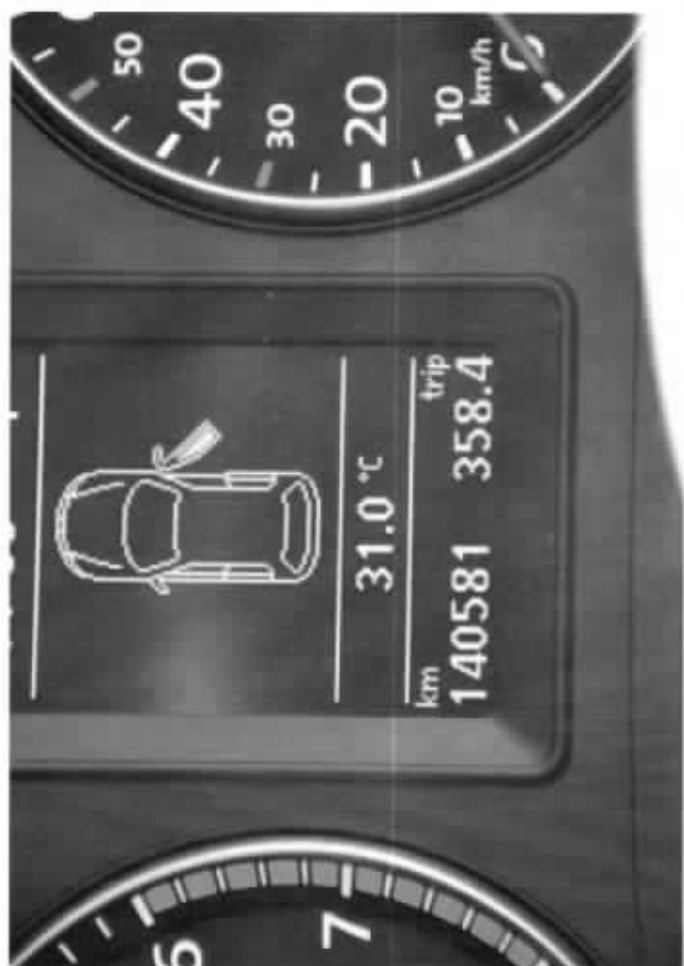


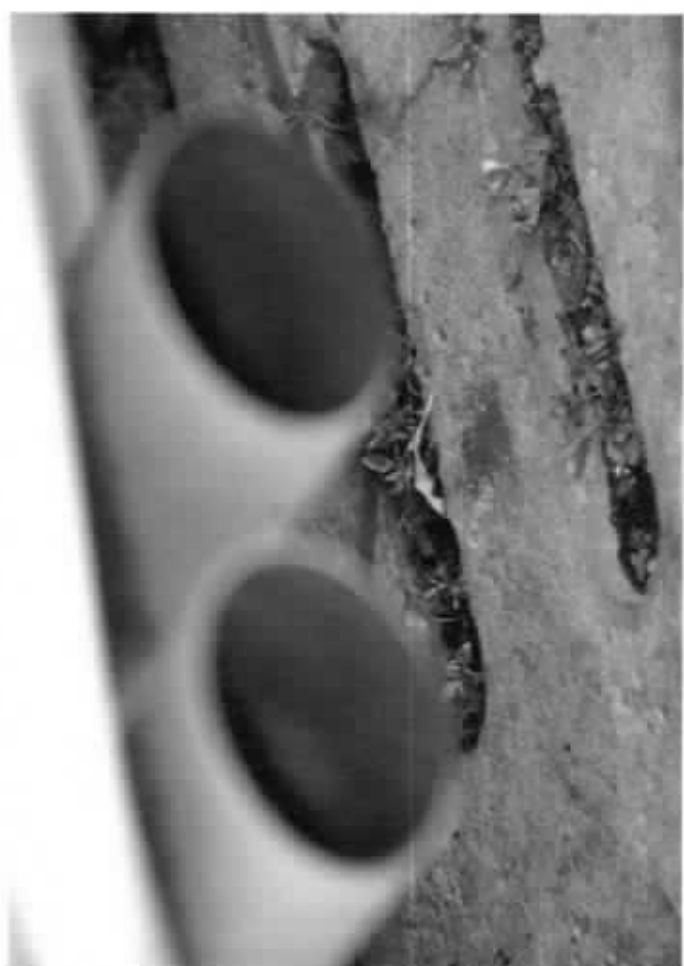












CHOW AUTOMOBILE ASSESSOR & SURVEYOR
BLK 299, BUKIT BATOK ST 22, #02-10, SINGAPORE 650299.
(Business Reg.No. 282126/00K)
Tel: 62941864, Fax: 66654133
Email: chowauto@singnet.com.sg

WITHOUT PREJUDICE

OUR REF.: C/AXA/M499/17

YOUR REF.: 17.23992.S.CK.xy MC Suit No. 10660 of 2017
Insured veh.: SBG 67 Y

DATE: 20.9.17

AXA INSURANCE TE LTD
C/O Seah Ong & Partners LLP
36, Robinson Road
#12-03 City House
Singapore 068877.

Dear Sir,

Re: Reinspection Of 3rd Party Vehicle
VEHICLE NO.: SKG 1960 E
MODEL : V/WAGEN SCIROCCO 1.4 AUTO
CHASSIS NO.: WVWZZZ13ZAV432987
ODOMETER : 140,581 KM
YEAR : 2010

We refer to your email.

We have reinspected the above vehicle at Benoi Place on 19/5/17 @ 1100hrs, with following documents attached.

- (1) Photocopies of M/s. Premier Appraiser Services Survey Report.
- (2) Photocopies photographs of above vehicle. (taken by 3rd Party's Surveyor)
- (3) Photocopies of both parties SAS report.

Having read the above documents and reinspected the vehicle, I have revised the cost of repairs to \$7,199.20 net on a part by part basis. (Please refer to "Appendix A") attached.

I believe the above recommendations in my opinion is fair and reasonable instead of lump sum \$13,100.00 nett as recommended by the 3rd party's surveyor.

I estimated that the repairs will take about 8 days instead of 11 days to complete.

....2/-

CHOW AUTOMOBILE ASSESSOR & SURVEYOR
BLK 299, BUKIT BATOK ST 22, #02-10, SINGAPORE 650299.
(Business Reg.No. 282126/00K)
Tel: 62941864, Fax: 66654133
Email: chowauto@singnet.com.sg

...2/-

OUR REF.: C/AXA/M499/17

YOUR REF.: 17.23992.S.CK.xy MC Suit No. 10660 of 2017
Insured veh.: SBG 67 Y

I enclosed 12 copies photograph taken at the time of reinspection for your perusal.

I now revert the above matter to your Insurance Co. for the final decision.

Thank you

Yours faithfully
CHOW AUTOMOBILE ASSESSOR AND SURVEYOR

Chow Cher Pow

C.P.CHOW
VEHICLE APPRAISER

<u>REPLACEMENT OF PARTS</u>	<u>REPAIRER'S ESTIMATE</u>		<u>REMARKS</u>	<u>REVISED</u>
TO SUPPLY (SKG 1960 E V/WAGEN SCIROCCO 1.4 AUTO)			YEAR : 2010 (D.O.A. 6.3.17)	
1 pc. Tail gate inner lock	226.80		Serviceable	
1 pc. Tail gate "VW" emblem	214.40		Not necessary	
1 pc. Tail gate "Scirocco" emblem	108.00		"	
1 pc. Tail gate "TSI" emblem	96.05		"	
1 pc. O/s tail lamp	523.00		Replace	493.60
1 pc. N/s tail lamp	523.00		"	493.60
1 pc. Rear end panel	962.80		"	639.80
1 pc. Rear end panel garnish	247.15		"	132.00
1 pc. Rear bumper	1,498.10		"	1,093.10
1 pc. Rear bumper reinforcement	678.30		"	375.10
1 pc. Rear bumper centre top bracket	213.35		"	94.00
1 pc. Rear bumper o/s bracket	143.10		"	87.20
1 pc. Rear bumper n/s bracket	143.10		"	87.20
1 pc. Rear bumper tow hook cover	54.55		"	29.30
1 pc. Rear bumper o/s reflector	85.95		"	85.95
1 pc. Rear bumper o/s mud cover	106.90		not fitted	
1 pc. Exhaust silencer assembly	1,712.80		Replace	1,284.70
1 pc. Exhaust o/s mounting	128.75		"	62.70
1 pc. Exhaust o/s mounting bracket	125.40		"	62.70
1 pc. Exhaust heat shield cover	250.25		"	134.80
2pcs. Exhaust front mountings	257.50		Serviceable	
1 pc. Exhaust centre pipe	1,499.05		"	
1 pc. Spare wheel tightening screw	143.90		"	
2pcs. Rear no. plate lamp bulbs	87.80		Replace	87.80
1 pc. Rear suspension sub-frame/axle	2,861.05		Not consistent	
1 pc. Rear suspension o/s lower arm	549.70		"	
1 pc. Rear suspension n/s lower arm	549.70		"	
	13,990.45			5,243.55
Less 10%	1,399.05		Less 10%	524.36
	12,591.41			4,719.20
1 pc. Rear no. plate	50.00	sn	Replace	50.00
1 pc. Reverse sensor	220.00	"	"	200.00
	12,861.41			4,969.20
<u>LABOUR CHARGES :</u>				
Remove and refit trunk compt. Trims and fittings, to enable to facilitate repairs.	120.00		Necessary	120.00
Remove damaged parts, jack out and cut out panels, realign rear body, replace damaged parts, weld where necessary and refit same.	1,500.00		Necessary	1,000.00
Balance C/F	14,481.41		Balance C/F	6,089.20

<u>REPLACEMENT OF PARTS</u>	<u>REPAIRER'S ESTIMATE</u>	<u>REMARKS</u>
TO SUPPLY (SKG 1960 E V/WAGEN SCIROCCO 1.4 AUTO)		YEAR : 2010 (D.O.A. 6.3.17)
Balance B/F	14,481.41	Balance B/F 6,089.20
Remove and dismantle both rear axle and suspensions, replace damaged parts, reassemble and refit same, including bleed brakes system.	480.00	Not necessary
Check and realign both rear wheel alignment.	80.00	Not necessary
Remove exhaust pipe assy., repair or replace damaged parts & refit same.	180.00	Necessary 80.00
Remove rear lamps, replace damaged lamps, refit same and check lights system.	30.00	Necessary 30.00
To conduct diagnostic check on the control units & reset memory to specification.	120.00	Necessary 120.00
Spray paint the exterior and interior of replacement parts, respray damaged parts and welding areas to same colour.	960.00	Necessary 800.00
To respray rust-proof under-seal to affected areas.	80.00	Necessary 80.00
TOTAL :	<u>16,411.41</u>	<u>7,199.20</u>

ADJUSTED AMOUNT	\$ 7,199.20
LUMP SUM REPAIR AT	\$ N.A
LESS EXCESS	\$ N.A
NETT TOTAL	<u>\$ 7,199.20</u>

IT IS ESTIMATED THAT THE REPAIRS WILL TAKE EIGHT DAYS TO COMPLETE.









Your Ref: 17.23002 S.CK.xy

Date: 24th May 2019

Our Ref: CS1/LAW18020378/Ktbe2

M/s Seah Ong & Partners LLP

36 Robinson Road
#12-03 City House
Singapore 068877

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SKG 1960E
INSURED VEHICLE: SBG 67Y
ACCIDENT DATE: 06/03/2017

We thank you for your instruction on 09/11/2018.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SKG 1960E from M/s Premier Appraiser Services.
- b) Survey report by Chow Automobile Assessor & Surveyor with colour photographs.
- c) Final Repair Bill of SKG 1960E from M/s T & B Motor Repairs Services Pte Ltd.
- d) Singapore Accident Statement of Vehicles SKG 1960E and SBG 67Y.
- e) Police Report of Vehicles SKG 1960E.
- f) Colour damaged vehicle photographs of SKG 1960E.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SKG 1960E
Make & Model	: Volkswagen Scirocco 1.4L AT TSI 1372Q5
Year of Registration	: 2010
Chassis Number	: WVWZZZ13ZAV432987
Engine Capacity	: 1390 cc

2. We recommend that the repairs of the entire damage require about 10 (Ten) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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 3

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKG 1960E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	TAIL GATE	TO REPAIR SEE LABOUR	1,712.95	-
1	TAIL GATE INNER LOCK	TO REPAIR SEE LABOUR	226.80	-
1	TAIL GATE LOWER LOCK CATCH	SERVICEABLE	172.20	-
1	TAIL GATE WEATHERSTRIP	SERVICEABLE	392.70	-
1	TAIL GATE "VW" EMBLEM	DAMAGED	214.40	214.40
1	TAIL GATE "SCIROCCO" EMBLEM	DAMAGED	108.00	108.00
1	TAIL GATE "TSI" EMBLEM	DAMAGED	96.05	96.05
1	O/S TAILLAMP	CHAFED / DAMAGED	523.00	523.00
1	N/S TAILLAMP	CHAFED / DAMAGED	523.00	523.00
1	REAR END PANEL	BADLY DENTED	962.80	962.80
1	REAR END PANEL GARNISH	DAMAGED	247.15	247.15
1	REAR BUMPER	BADLY DENTED	1,498.10	1,498.10
1	REAR BUMPER REINFORCEMENT	BADLY DENTED	678.30	678.30
1	REAR BUMPER CENTRE TOP BRACKET	DAMAGED	213.35	213.35
1	REAR BUMPER O/S BRACKET	DAMAGED	143.10	143.10
1	REAR BUMPER N/S BRACKET	DAMAGED	143.10	143.10
1	REAR BUMPER TOW HOOK COVER	DAMAGED	54.55	54.55
1	REAR BUMPER O/S REFLECTOR	DAMAGED	85.95	85.95
1	REAR BUMPER N/S REFLECTOR	SERVICEABLE	85.95	-
1	REAR BUMPER O/S MUD COVER	SERVICEABLE	106.90	-
1	REAR BUMPER N/S MUD COVER	SERVICEABLE	106.90	-
1	EXHAUST SILENCER ASSEMBLY	BADLY DENTED	1,712.80	1,712.80
1	EXHAUST O/S MOUNTING	DAMAGED	128.75	128.75
1	EXHAUST O/S MOUNTING BKT	DAMAGED	125.40	125.40
1	EXHAUST HEAT SHIELD COVER	BUCKLED	250.25	250.25
2	EXHAUST FRONT MOUNTINGS	DAMAGED	257.50	257.50
1	SPARE WHEEL TIGHTENING SCREW	SERVICEABLE	143.90	-
1	REAR NUMBER PLATE LAMP WIRE	SERVICEABLE	538.85	-
2	REAR NUMBER PLATE LAMP BULBS	DAMAGED	87.80	87.80
1	REAR SUSP SUB-FRAME / AXLE	SERVICEABLE	2,861.05	-
1	REAR SUSP O/S LOWER ARM	SERVICEABLE	549.70	-

Report Ref No. CS1/LAW18020378/Ktbe2



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.:2 of 3

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR SUSP N/S LOWER ARM LESS 10% DISCOUNT	SERVICEABLE	549.70 -1,550.10 13,950.85	- -805.34 7,248.01
1	EXHAUST CENTRE PIPE (LOCAL REPAIR) (SN) LESS 10% DISCOUNT	BENT	1,499.05 -149.91 1,349.14	400.00 - 400.00
<u>SPECIAL NETT ITEMS</u>				
1	REAR WINDSCREEN SEALANT (SN)	NOT REQUIRED	70.00	-
1	REAR NUMBER PLATE (SN)	DAMAGED	70.00	50.00
1	REVERSE SENSORS (SN)	DAMAGED	320.00	220.00
1	N/S REAR ABS SENSOR (SN)	SERVICEABLE	2,346.90 2,806.90	- 270.00
<u>LABOUR</u>				
	TO REMOVE / REFIT REAR SEAT, UPHOLSTERY, INTERIOR TRIMS AND GARNISH TO ASSIST REPAIRS. (LUGGAGE ONLY)		480.00	120.00
	TO REMOVE / REFIT REAR WINDSCREEN TO ASSIST REPAIRS.	NOT NECESSARY	180.00	-
	LABOUR CHARGES TO REPAIR, PANEL BEAT AND STRAIGHTEN DAMAGED PARTS AND REPLACE THE ABOVE-MENTIONED PARTS. INCLUSIVE OF THE REPAIR OF TAILGATE AND TAIL GATE INNER LOCK.		1,850.00	1,000.00
	TO TRANSFER TAIL GATE FITTINGS AND COMPONENTS.	NOT NECESSARY	120.00	-
	TO DISMANTLE / REPLACE REAR SUSPENSION, CROSS MEMBER AND LOWER ARMS.	NOT NECESSARY	1,000.00	-
	TO CHECK & ADJUST WHEEL ALIGNMENT & STEERING GEOMETRY.	NOT NECESSARY	120.00	-
	TO REMOVE / REPLACE EXHAUST SYSTEM INCLUDING CENTRE PIPE.		280.00	120.00
	TO CHECK WIRING FUNCTION.		180.00	30.00
	COMPUTER DIAGNOSE / CHECK & RESET ABS & PARKING SENSORS.		120.00	120.00
	TO PUTTY, APPLY PRIMER & SPRAY-PAINT THE AFFECTED AREAS.		1,200.00	880.00
	TO WASH CUSHION AND CLEAN WHOLE VEHICLE.	NOT NECESSARY	250.00	-
	TO APPLY RUST-PROOFING ON REPAIRED / REPLACED PANELS.		180.00	80.00
			5,960.00	2,350.00

Report Ref No. CS1/LAW18020378/Ktbe2



GRAND TOTAL		24,066.89	10,268.01
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			8,200.00

Report Ref No. CS1/LAW18020378/Ktbe2

KONG SENG CHEONG

Licensed Appraiser

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