

ASS. REC. BY:

REF:

CSB/SMO18020720/Jcd3

Special Instruction:

Surveyor:

Maximen

## ASSIGNMENT (Office)

From (Person):

Mulvin Ye

of

SMO

Date/Time:

15/11/18 @ 3:57pm

Estimated Cost:

Bill to:

OD (T) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SKT 9013T

Insured:

GBF 5230P

at Workshop m/s

Carfeels

Tel:

9722 7833

of

BLK 14 Sin Ming Ind. Est @ 1-17

Policy No:

D17MTPCVE003087

Claim No:

CMTD1804958

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

12/11/2018

CA / REV / REP. / REV 24 HRS

(up)

19/11/2018

H.O.D. Endorsement:

Date/Time:

4:11pm @ 15/11/18

Person Contacted:

Kevin

Vehicle IN/OUT

Date/Time

Action/Instruction

(X)

Estimate

Insp: 160 Sin Ming Drive # 05-18

SKT 9013T - X

GBF 5230P - CG/AIG18020427/Uta3

DOA: 12/11/18

Dismantle: 20/11/2018

After repair: 23/11/2018

PRS

Three Jie

REF: SM10

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: \_\_\_\_\_

at Workshop m/s

of 160 Sin Ming Dr #05-18

Insured: \_\_\_\_\_

Policy No: \_\_\_\_\_

Claims No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 4 days Res: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle IN / OUT

Veh No: SKT 9013 T Yr Regn: 25 Jun 2015

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

Truck / Trailer or

Make: Volkswagen Jetta c.c. 1390

Colour: Brown A/C Insured / Std / NI / NA

Sp. Reading: 114955 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: WVWZZZ16ZFMO3299S

Gen. Cond: ☒ Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt or

Brake: ☒ In order / Jammed / Leaked / Burnt or

Modi: Nil / ☒ SRIM / STD A/Rim or

Tyre Size: F: 225/45 R 17

R: \_\_\_\_\_

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 12/11/18 D.O.I. 19/11/18

Survey held at Carfeels @ 1430

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

Rear

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

Date / Time Action / Instruction

Range: \$2,800 - \$3,500

4 days

23/11/2018

Date/Time: File Pass to?



: Preli. Report



: Final Report

1)

Date/Time: File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation

) \$ + R\$ 9

) Photos

) Oners

)

TOTAL

Report Format: PRE

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

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$

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

### CLAIM SUBFOLDER TRACKING

| Case | Notified    | Est Submitted | Adj Assigned                                   | Adj Rpt | Adj Submitted | Ins Auth'd | Status   |
|------|-------------|---------------|--|---------|---------------|------------|--|
| Main | 12 Nov 2018 |               | 15 Nov 2018<br>15:57<br><a href="#">Assign</a> |         |               |            | <b>New Assignment</b><br><a href="#">Cancel Case</a> |

|                      |                           |                               |                           |                          |
|----------------------|---------------------------|-------------------------------|---------------------------|--------------------------|
| <a href="#">Main</a> | <a href="#">Reference</a> | <a href="#">Claim Details</a> | <a href="#">Documents</a> | <a href="#">Show All</a> |
|----------------------|---------------------------|-------------------------------|---------------------------|--------------------------|

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

|                             |   |                        |                                 |
|-----------------------------|---|------------------------|---------------------------------|
| Insured:                    | KYK CONSTRUCTION PTE LTD, Co. Reg. No.: 201329270R  |                        |                                 |
| Main Claimant:              | CHIA CHEE HOONG, ID: S7135601I  |                        |                                 |
| Vehicle Reg. No.:           | SKT9013T  | Date of Loss:          | 12/11/2018 07:00 - :59          |
| Claim Type:                 | TP / CMTD1804958  | Policy/Cover Note No.: | D17MTPCVE003087 (Comprehensive) |
| Vehicle Reg. No. (Insured): | GBF5230P  | Policy No. (Claimant): |                                 |
|                             |   | Excess:                |                                 |
| Repairer:                   | Carfeels Pte Ltd (HQ) Blk 14 Sin Ming Industrial Estate @01-17, Sector B, Singapore 575658., 575658 Sin Ming - Tel: |                        |                                 |
| Handling Insurer:           | Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Melvin Ye - 6322 4667]                    |                        |                                 |
| Adjuster:                   | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 26/11/2018]                                   |                        |                                 |
| Driver/Custodian (Insured): | CHAN YOUNG KEAN (), NRIC: S8187964H, Tel: +6598760327   |                        |                                 |
| Adj Asg. Remarks:           | REPAIRER : 160 SIN MING DRIVE #05-18 SM AUTOCITY  |                        |                                 |

### ASSOCIATED MAIL RECEIVED

[View All](#)

[Compose Case Mail](#)

There are no mail for this case.

### ALL ASSOCIATED TASKS

[View All](#)

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[Create New Task](#)

[Complete](#)

| Due Date    | Priority | Type | Task Group | Subject | Handler | Assigned By | Completed On | Created On | Done? |
|-------------|----------|------|------------|---------|---------|-------------|--------------|------------|-------|
| No results. |          |      |            |         |         |             |              |            |       |

(HTD) 180 4958/ MYE

**TOMMY CHOO, MARK GO LLC**

Advocates &amp; Solicitors Commissioner For Oaths Notary Public

UEN NO : 201523418E

(a law corporation with limited liability)

151 CHIN SWEE ROAD #14-15/16  
 MANHATTAN HOUSE  
 SINGAPORE 169878  
 TEL : (65) 6532 2455  
 FAX : (65) 6538 9850 (Services of Court Documents By Fax Not Accepted)

EMAIL: [lhling@tcmg.com.sg](mailto:lhling@tcmg.com.sg)

Our Ref : TCMG/SKT 9013 T/1118/CF

Your Ref : GBF 5230 P

14 November 2018

M/s Sompoo Insurance Co Ltd  
 50 Raffles Place  
 #05-01/06 Singapore Land Tower  
 Singapore 048623

**Attn: Motor Claims Department**

Dear Sirs,

**PRE-REPAIR INSPECTION NOTICE**

We act for **Chia Chee Hoong**, the owner and/or driver of motor vehicle no. SKT 9013 T, which was involved in an accident along Sengkang West Road towards TPE, on 12<sup>th</sup> November 2018 at 07:00 hrs.

We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. GBF 5230 P for damages and/or injuries, costs and disbursements as a result of your insured's negligence.

Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s Carfeels Pte Ltd, (Block 160 Sin Ming Drive #05-18, Sin Ming Autocity, Singapore 575722 - Kevin @ 9722 7833).

If we do not hear from you within the next **two (2) working days**, we shall deem that you have waived the requirement for the pre-repair inspection.

Yours faithfully,

**LING LEONG HUI (MR)**

c.c. M/s Carfeels Pte Ltd  
 (Yref SKT 9013 T)

**BY FAX NO. 6221 3147 ONLY**

|                                      |  |
|--------------------------------------|--|
| Sompoo Insurance Singapore Pte. Ltd. |  |
| Claims                               |  |
| 14 NOV 2018                          |  |
|                                      |  |
|                                      |  |
|                                      |  |

**BY FAX NO. 6452 9817 ONLY**

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

|                            |  |
|----------------------------|--|
| Date Of Report             | 13/11/2018 20:08                             |
| Date Of Accident           | 12/11/2018 07:00                             |
| Exact Location Of Accident | SENGKANG WEST RD TOWARDS TPE( TRAFFIC LIGHT) |
| Country/State of Loss      | SINGAPORE                                    |

### DETAILS OF OWN VEHICLE

|                             |                             |
|-----------------------------|-----------------------------|
| Vehicle Registration Number | SKT9013T                    |
| <b>Insured/Policyholder</b> |                             |
| Name Of Registered Owner    | CHIA CHEE HOONG             |
| NRIC No                     | S7135601I                   |
| Email Address               | RICK_BRAVOTINO@YAHOO.COM.AU |
| Mobile Phone No             | (LOCAL) +65-97913298        |
| Alternative Phone No        | OFFICE-97913298             |

### Vehicle Particulars

|              |               |
|--------------|---------------|
| Manufacturer | VOLKSWAGEN    |
| Model        | JETTA 1.4 TSI |

|  |         |
|--|---------|
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE |
|--|---------|

|  |    |
|--|----|
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
|--|----|

|  |             |
|--|-------------|
| If No, Please state action to be taken | THIRD PARTY |
|--|-------------|

|                  |             |
|------------------|-------------|
| Vehicle Category | PRIVATE CAR |
|------------------|-------------|

### Insurance Company

|                           |               |
|---------------------------|---------------|
| Name of Insurance Company | AVIVA LTD     |
| Type Of Coverage          | COMPREHENSIVE |
| Fleet Policy              | NO            |
| Policy Number             | 10839281      |
| Cover Note Number         |               |

### Driver

|                      |                             |
|----------------------|-----------------------------|
| Name of Driver       | CHIA CHEE HOONG             |
| NRIC No              | S7135601I                   |
| Date Of Birth        | 29/09/1971                  |
| Occupation           | INDOOR                      |
| Date Of Driving Pass | 08/07/1994                  |
| Driving Experience   | 24 YEARS AND 4 MONTHS       |
| Gender               | MALE                        |
| Mobile Number        | (LOCAL) +65-97913298        |
| Fax Number           |                             |
| Contact Number       | OFFICE-97913298             |
| Email Address        | RICK_BRAVOTINO@YAHOO.COM.AU |

|   |       |
|---|-------|
| Address   | NIL   |
| Postcode  |       |
| Was driver an employee of the Insured's Company     | NO    |
| If No, Relationship of the Driver with the Insured  | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | -     |
|   | -     |
|   | -     |
| Insurance Company of Driver's Own Vehicle           | -     |
|   | -     |
|   | -     |

#### General Information of the Accident

|                    |                 |
|--------------------|-----------------|
| Type Of Accident   | CHAIN COLLISION |
| Weather Conditions | CLEAR           |
| Road Surface       | DRY             |

#### Other Information

|   |     |
|---|-----|
| Was any foreign vehicle involved in this accident?  | NO  |
| Number of vehicles involved in the accident   |     |
| Was any body injured in the Accident?   | NO  |
| Was any injured conveyed to hospital by ambulance?  | NO  |
| Was any other material or property damaged?   | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO  |
| Number of Passengers (Including Driver)   | 1   |

#### Details of Police Action

|   |    |
|---|----|
| Was the accident reported to the police?  | NO |
| If Yes, Please state which Police Station |    |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom?                     |    |

#### Circumstances of Accident

I was travelling along SENGKANG WEST ROAD TOWARDS TPE suddenly vehicle GBF5230P collided onto my rear when I got off my car then I realise it's a chain collision another vehicle (don't know plate number) hit vehicle GBF5230P rear and den vehicle GBF5230P front collided onto my vehicle SKT9013T rear. No injuries involved. CHAIN COLLISION 3 VEHICLES

#### Attachment(s)

|   |   |
|---|---|
| Are accident photos available for attachment? | YES   |
| Was there any video captured by Car Camera?   | YES   |
| Remarks/ Reasons:                             | WILL FORWARD TO INSURANCE ONCE INSURED SEND |
| Was there any audio recorded?                 | NO  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                                     |                    |
|-------------------------------------|--------------------|
| Vehicle Registration Number         | GBF5230P           |
| Vehicle Make/Model/Colour           | TOYOTA DYNA WHITE  |
| Details Of Properties               |                    |
| Vehicle Category                    | COMMERCIAL VEHICLE |
| Name of Driver                      | CHAN YOUNG KEAN    |
| NRIC/Passport Number                | S8187964H          |
| Contact Number                      |                    |
| Address                             |                    |
| Postcode                            |                    |
| Insurance Company Name              |                    |
| Nature Of Damage                    |                    |
| No. Of Passenger (Including Driver) |                    |

#### DETAILS OF OTHER VEHICLE PROPERTY 2

1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

NA/UNKNOWN

Name of Driver

HO SHU KIEN

NRIC/Passport Number

S8103068E

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



# Accident Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

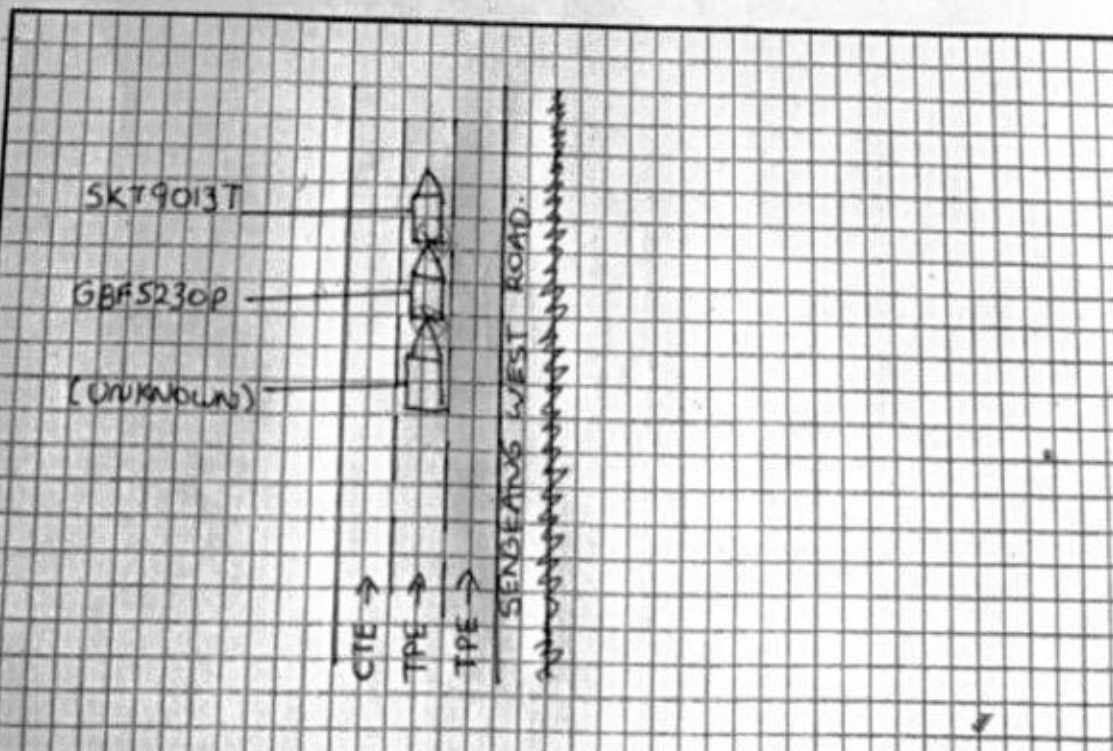
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of 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 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.

VERIFIED BY AJAX MARS  
REPORTING OFFICER  
Mohamed Saifullah S/O Syed  
Masood  
Witnessed by Reporting Centre  
Personnel

Policyholder's Signature / Date & Time

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

### Sketch Plan





Common Statement Pg. 1

ACCIDENT STATEMENT (2000 characters)

I was travelling along SENGKANG WEST ROAD TOWARDS TPE suddenly vehicle GBF5230P collided onto my rear when I got off my car then I realise it's a chain collision another vehicle (don't know plate number) hit vehicle GBF5230P rear and den vehicle GBF5230P front collided onto my vehicle SKT9013T rear. No injuries involved.

CHAIN COLLISION 3 VEHICLES

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MOHAMED SAIFULLAH S/O SYED MASOOD

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

13 November 2018 at 6:43 PM

Date/Time:

13 November 2018 at 6:43 PM

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

### CLAIM SUBFOLDER TRACKING

| Case | Notified    | Est Submitted | Adj Assigned   | Adj Rpt  | Adj Submitted                              | Ins Auth'd | Status  |
|------|-------------|---------------|--|--|--|------------|---|
| Main | 12 Nov 2018 |               | 15 Nov 2018<br>15:57<br><a href="#">Edit Adj Rpt</a> | <b>S\$0.00</b><br><a href="#">Edit Estimates</a> | <b>S\$0.00</b><br><a href="#">View Rpt</a> |            | <b>Pending for Survey Report</b><br><a href="#">Cancel Case</a> |

Main

Reference

Claim Details

Documents

[Show All](#)

### CLAIM SUBFOLDER DETAILS

[Created by insurer]

|                             |  |                        |  |
|-----------------------------|--|------------------------|--|
| Insured:                    | <b>KYK CONSTRUCTION PTE LTD</b> , Co. Reg. No.: 201329270R   |                        |  |
| Main Claimant:              | <b>CHIA CHEE HOONG</b> , ID: S71356011   |                        |  |
| Vehicle Reg. No.:           | <b>SKT9013T</b>  | Date of Loss:          | 12/11/2018 07:00 - :59<br>[40 Months and 18 Days From LTA Reg Date (Man Yr)] |
| Claim Type:                 | <b>TP / CMTD1804958</b>  | Policy/Cover Note No.: | D17MTPCVE003087 (Comprehensive)  |
| Vehicle Reg. No. (Insured): | <b>GBF5230P</b>  | Policy No. (Claimant): |  |
|                             |  | Excess:                |  |
| Repairer:                   | <b>Carfeels Pte Ltd (HQ)</b> Blk 14 Sin Ming Industrial Estate @01-17, Sector B, Singapore 575658., 575658 Sin Ming - Tel:     |                        |  |
| Handling Insurer:           | <b>Sompo Insurance Singapore Pte. Ltd. (HQ)</b> - Tel: 6461 6555 ... [Handled by <b>NGO SAU WEI SHAWN</b> - 6329 5202]         |                        |  |
| Adjuster:                   | <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>ONG HWEE JIE</b> ] ... [Final Rpt due 26/11/2018] |                        |  |
| Driver/Custodian (Insured): | CHAN YOUNG KEAN (), NRIC: S8187964H, Tel: +6598760327  |                        |  |
| Adj Asg. Remarks:           | REPAIRER : 160 SIN MING DRIVE #05-18 SM AUTOCITY   |                        |  |

### 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

**\*SKT9013T (CMTD1804958)**  
**[GBF5230P]**  
**TP**  
**CHIA CHEE HOONG**  
**Nov 12 2018 7:00AM**  
**[KYK CONSTRUCTION PTE LTD]**  
**Carfeels Pte Ltd**

Upload Documents Upload Photos Compose New Letter

View View in Browser ▼

### Assessment Reports

1 per page ▼

| No | Finalized On   | Sompo Insurance Singapore Pte. Ltd. (HQ)  | Thumbnail  | Print |
|----|----------------|---|------------|-------|
| 1  | 15/11/18 15:55 | <b>Accident Statement</b><br>From: SC - Reg. No: GBF5230P, Claimant: KYK CONSTRUCTION PTE LTD | 1 Load HTM |       |

### Photos/Images

3 per page ▼

| No | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail  | Print |
|----|-----------------|-----------------------------------|------------|-------|
| 1  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 2  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 3  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 4  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 5  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 6  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 7  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 8  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 9  | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 10 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 11 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 12 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 13 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 14 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 15 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 16 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 17 | 21/11/18 17:45  | General View                      | 1 Load JPG | ✓     |
| 18 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 19 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 20 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 21 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 22 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 23 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 24 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 25 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 26 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 27 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 28 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 29 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 30 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |
| 31 | 21/11/18 17:45  | Photographs of Damaged Parts      | 1 Load JPG | ✓     |

## Documents Checklist

| DOCUMENTS CHECKLIST   | Reset | Save | Print |
|---|-------|------|-------|
| There are no document checklists configured.                      |       |      |       |
| <b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>  |       |      |       |
| <b>Show Remarks To:</b> <input type="checkbox"/> 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: CS3/SMO18020720/JCD3S2

Date: 06/12/2018

## REFERENCE

Handling Insurer: Sompoo Insurance Singapore Pte. Ltd. Policy No: D17MTPCVE003087  
 Claimant Vehicle No: SKT9013T Insured Vehicle No: GBF5230P  
 Date of Loss: 12/11/2018 Nature of Claim: TP Claim No: CMTD1804958

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: **SKT9013T**  
 Make & Model: VOLKSWAGEN JETTA, 1.4 TSI (A) Engine No: CAXF52689  
 Reg. Date: 25/06/2015 (Man. Year: 2015) Chassis No: WVVZZZ16ZFM032995  
 Colour: Brown Odometer: 114955 km  
 Engine Capacity: 1390 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:

## CONDITION OF TYRES

Front Tyre Size: 225/45R17 Rear Tyre Size: 225/45R17  
 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        |        |
| <b>Nett Amount (S\$)</b> | <b>0.00</b> | <b>0.00</b> | <b>0.00</b> |        |

## INSPECTION

Date of Assignment: 15/11/2018  
 Date Inspected: 19/11/2018 Inspected At: 160 SIN MING DRIVE #05-18  
 Estimated Period of Repair: 4.0 days Repairer: Carfeels Pte Ltd

Adjuster: ONG HWEE JIE

Manager: CELINE FONG

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.

- A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
- B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.  
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
- C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$2,800.00 - \$3,500.00



## REPAIR DETAILS

### Reference

**Part Source:** MRM-SG      Version: 1.0 (Last Synchronised: 06 Dec 2018)

**Parts:** 143      VOLKSWAGEN JETTA 1.4 TSI (A) (Catalogue:Merimen Singapore 1.0)

**Labour:** Repairer's      (Price-denominated Standard List)

**Print Code:** (Unsubmitted, no print-code for SKT9013T)

**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.

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

There are no labour items selected.

Report was unsubmitted during this print-out.

< END OF ESTIMATES >