

22/03/2002

ASS. REC. BY:

REF: CS3 / III 18021086 / J doe Special Instruction:

Surveyor

mumun

ASSIGNMENT (Office)

From (Person): Joel Nah of W Date/Time: 21.11.2018 450pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: PC 886E Insured: SHA 4352H

at Workshop m/s Yellow Bus Tel: 9833 5843

of 160 Sin Ming Drx #01-07

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 01.10.2018

(Client's Record)

CA / REV / REP. / REV 24 HRS wpi

22.11.2018 @ before go call David

I.O.D. Endorsement:

Date/Time: 21.11.2018 5:16pm Person Contacted: David Vehicle IN/OUT

Date/Time	Action/Instruction ( X ) Estimate
	PC 886E - X
	SHA 4352H - CS6 / III 18005581 / Tlw4542 OCA: 22/11/2018
	Dismantle: 23/11/2018 @ 1.05pm
	After repair: 28/11/2018 @ 4.45pm



Emergency Have I?

## TOTAL

120

10

134

**Catherine Chong (LKK Auto)**

---

**From:** Motor Claim - III <motorclaim@iii.com.sg>  
**Sent:** Wednesday, 21 November, 2018 4:50 PM  
**To:** Catherine Chong (LKK Auto)  
**Cc:** Mekavathanan Sarangapani; Sherini Pillai; Accident@kscgp.com  
**Subject:** FW: 2nd PRS - Notice to conduct Pre-Prepair Survey - Your insured's vehicle: SHA 4352H and our ref: PC 886E/YB/sy/cl  
**Attachments:** 2nd PRS (reject) - 21.11.18.pdf

Dear Sir / Mdm

**This Pre-Repair Survey is on Without Prejudice Basis.**

THIRD PARTY VEHICLE NO. : PC 886E  
III INSURED VEHICLE NO. : SHA 4352H  
DATE OF LOSS : 01/10/2018

We acknowledge receipt of your email.

**In compliance to Pre-Action Protocol for NIMA cases, we note that**

We disagree to the list of motor surveyors that you have proposed.

Therefore, we have appointed our surveyor \_lkk\_\_\_\_\_ to conduct the pre-repair survey.

This claim is handled by SHERINI

Please let us have your client's accident report and repair estimate for our appointed surveyor to conclude his report.

**\*\*We would like to conduct a re-survey after spray painting. Please contact our surveyor to arrange.**  
**\*\*Surveyor kindly upload this assignment to Merimen.**

Thank You.

Joel Nah  
Motor Claims Department  
India International Insurance Pte Ltd  
64 Cecil Street #04-02 IOB Building  
Singapore 049711  
Tel: 6347 6100 Ext 206 Fax: 6224 4174

**From:** Accident@kscgp.com [mailto:Accident@kscgp.com]  
**Sent:** Wednesday, 21 November, 2018 4:44 PM  
**To:** Motor Claim - III <motorclaim@iii.com.sg>  
**Cc:** motor@kscgp.com  
**Subject:** 2nd PRS - Notice to conduct Pre-Prepair Survey - Your insured's vehicle: SHA 4352H and our ref: PC 886E/YB/sy/cl

Dear Sir,

Please find enclosed our 2nd PRS Notice to conduct Pre-Prepair Survey, for your attention.

Thank you.

Regards,  
Calshie LIM  
for and on behalf of Mr Gurdeep Singh Sekhon  
KSCGP Juris LLP  
10 Hoe Chiang Road  
#13-03A Keppel Towers  
Singapore 089315  
Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708  
Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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----- Original Message -----

**From:** Motor Claim - III [<mailto:motorclaim@iii.com.sg>]

**To:** [Accident@kscgp.com](mailto:Accident@kscgp.com)

**Sent:** Wed, 21 Nov 2018 07:57:17 +0000

**Subject:**

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

Joel Nah

**Motor Claims Department**

**India International Insurance Pte Ltd**

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 206 Fax: 6224 4174

**From:** [Accident@kscgp.com](mailto:Accident@kscgp.com) [<mailto:Accident@kscgp.com>]

**Sent:** Wednesday, 21 November, 2018 3:51 PM

**To:** Motor Claim - III <[motorclaim@iii.com.sg](mailto:motorclaim@iii.com.sg)>

**Cc:** [motor@kscgp.com](mailto:motor@kscgp.com)

**Subject:** 1st PRS - Notice to conduct Pre-Prepair Survey - Your insured's vehicle: SHA 4352H and our ref: PC 886E/YB/5y/cl

Dear Sirs,

Please find enclosed our 1st PRS Notice to conduct Pre-Prepair Survey, for your attention and necessary action.

Thank you.

Regards,  
Calshie LIM  
for and on behalf of Mr Gurdeep Singh Sekhon  
KSCGP Juris LLP  
10 Hoe Chiang Road  
#13-03A Keppel Towers  
Singapore 089315  
Tel: 6538 3611 / DID: 3152 0989 / Fax: 6538 3708  
Email: [accident@kscgp.com](mailto:accident@kscgp.com)

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Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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If you are not the person for whom this e-mail was intended, or if this e-mail has reached you by mistake, please delete it immediately and inform us of the error and also be hereby notified that any use, distribution, transmission, printing, copying or dissemination of this information in any way or in any manner is strictly prohibited and may be unlawful. Internet communications may not be entirely secure or accurate as information could be intercepted, corrupted, lost, delayed or contain viruses.

Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Kindly note that by submitting this claim to us, you are deemed to have agreed to us collecting, using, disclosing and processing your personal data, sharing your personal data with our service providers (located both inside and outside Singapore) and/or with other insurers in the general insurance industry, including the General Insurance Association of Singapore. This enables us to ensure proper processing, handling

and/or dealing with your claim, which includes investigating the said claim, and complying with applicable laws. If you do not agree to the same, kindly let us know immediately.

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Therefore, we do not accept liability for any errors or omissions in the content of this message or any delay in delivery which may arise as a result of Internet transmission or any modification.

Print this email only if it is absolutely necessary and help in preservation of environment.

India International Insurance Pte Ltd.

Registration No. 198703792-K

Your Ref : SHA 4352H  
Our Ref : PC 886E/YB/sy/cl  
Date : 21 November 2018

Fax : 6538 3708  
Tel : 3152 0982  
Email : [accident@kscgp.com](mailto:accident@kscgp.com)

INDIA INTERNATIONAL INSURANCE PTE LTD

BY EMAIL ONLY

**DATE OF ACCIDENT: 01 OCTOBER 2018**

**NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS**

We refer to your email dated

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead we propose you to choose a surveyor from our client's list of surveyors as appended below:-

S/No	Name of Surveyor	Company Name
1.	Lek Boon Hwee	Auto Performance Appraisal (Our client's preferred surveyor)
2.	Oh Han Cheong	Oh Appraisal Services
3.	Lim Say Koon	SK Appraisal Pte Ltd
4.	Edwin Koh	Auto Hyperdeals Pte Ltd

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please be informed that the said vehicle can be surveyed / inspected at:

Address : Yellowbus Workshop & Trading Pte Ltd  
160 Sin Ming Drive  
#01-07 Sin Ming Auto City  
Singapore 575722

Contact Person/Tel : David Lim / 9833 5843

Yours faithfully,

*CL*

Your Ref : SHA 4352H  
Our Ref : PC 886E/YB/sy/cl  
Date : 21 November 2018

### Acknowledgement

This is to confirm that I \_\_\_\_\_ *[Full Name of Surveyor]* of  
\_\_\_\_\_ *[Surveyor's Company]* have completed as follows:-

(a) Pre- Repair Survey/Inspection on \_\_\_\_\_ [Date] at \_\_\_\_\_ [Time].

\_\_\_\_\_  
Name and signature of Appointed Surveyor  
Company Stamp

\_\_\_\_\_  
Witnessed by:  
Date:

(b) Pre- Repair Survey/Inspection (during dismantling) on \_\_\_\_\_ [Date] at \_\_\_\_\_ [Time].

\_\_\_\_\_  
Name and signature of Appointed Surveyor  
Company Stamp

\_\_\_\_\_  
Witnessed by:  
Date:

(c) Re-inspection of new replacement part (part by part) on \_\_\_\_\_ [Date] at \_\_\_\_\_ [Time].

\_\_\_\_\_  
Name and signature of Appointed Surveyor  
Company Stamp

\_\_\_\_\_  
Witnessed by:  
Date:

(d) Post – Repair Survey/Inspection on \_\_\_\_\_ [Date] at \_\_\_\_\_ [Time].

\_\_\_\_\_  
Name and signature of Appointed Surveyor  
Company Stamp

\_\_\_\_\_  
Witnessed by:  
Date:



[> Back to OneMotoring](#)

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	3143M
<b>Vehicle Details</b>	
Vehicle No.:	PC886E
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Dec 2018
Vehicle Make:	HIGER
Vehicle Model:	KLQ6916Q 6.7L MANUAL TURBO ABS 13.5T
Primary Colour:	Multi-Colour
Manufacturing Year:	2011
Engine No.:	ISBE4225B21960412
Chassis No.:	LKLR1ESC7BA569584
Maximum Power Output:	-
Open Market Value:	\$60,864.00
Original Registration Date:	24 Nov 2011
First Registration Date:	24 Nov 2011
Transfer Count:	0
Actual ARF Paid:	\$3,044.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	23 Nov 2021
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$40,189.00
COE Rebate Amount:	\$11,900.00
<b>Total Rebate Amount:</b>	<b>\$11,900.00</b>

The information contained herein is correct as at 07 Dec 2018

OK

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

Date Of Report 01/10/2018 12:38  
 Date Of Accident 01/10/2018 10:10  
 Exact Location Of Accident MCE TOWARDS TUAS  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number PC886E  
**Insured/Policyholder**  
 Name Of Registered Owner YELLOW BUS SERVICES PTE LTD  
 Co Reg No - 200813143M  
 Email Address NOEMAIL  
 Mobile Phone No (LOCAL) +65-85884939  
 Alternative Phone No OFFICE-85884939

### Vehicle Particulars

Manufacturer HIGER  
 Model -  
 Exact Purpose for which vehicle was being used at time of accident WORK PURPOSE  
 Are you claiming under your own insurance policy for repair to your vehicle? NO  
 If No, Please state action to be taken THIRD PARTY  
 Vehicle Category BUS

### Insurance Company

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD  
 Type Of Coverage COMPREHENSIVE  
 Fleet Policy NO  
 Policy Number M494678 (COMP)  
 Cover Note Number

### Driver

Name of Driver CHENG SHAODONG  
 NRIC No G2039514T  
 Date Of Birth 11/04/1971  
 Occupation OUTDOOR  
 Date Of Driving Pass 22/06/2012  
 Driving Experience 6 YEARS AND 3 MONTHS  
 Gender MALE  
 Mobile Number (LOCAL) +65-83611573  
 Fax Number  
 Contact Number OTHERS-83611573  
 Email Address NOEMAIL

Address	C/O NO 3 AMK STREET 62 #08-04 LINK @ AMK
Postcode	569139
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

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

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	7

#### 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 DRIVING STRAIGHT ALONG MCE TOWARDS TUAS. A VEHICLE SHA 4352H WHICH WAS DRIVING ON THE LEFT LANE SUDDENLY CUT INTO MY LANE ABRUPTLY. THUS, VEHICLE SHA 4352H FRONT RIGHT PORTION COLLIDED INTO THE LEFT SIDE PORTION OF MY VEHICLE. (ATTENDED BY CHRISTINA)

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	UNABLE TO UPLOAD
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA4352H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	HAIRUINARABHID BIN ABDUL RAHMAN
NRIC/Passport Number	S7413878J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: : UNKNOWN (NOT SURE MALE OR FEMALE)

GENDER: : MALE

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all Insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the Information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

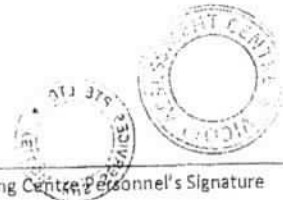


Policyholder's Signature  
Date & Time:

*[Handwritten Signature]*

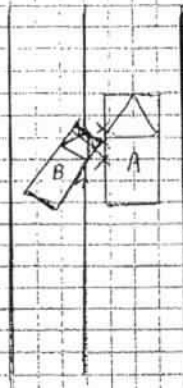
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

01 OCT 2010



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

### SKETCH PLAN



A-PC 886E

B-SHA 4352 H

DOA. 1/10/18

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

### DECLARATION

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



Policyholder's Signature  
Date & Time:

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

01 OCT 2018



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

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

PRI

## CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	23 Nov 2018 <a href="#">Edit Reg</a>		21 Nov 2018 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$0.00</b> <a href="#">Edit Estimates</a>	<b>S\$0.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by adjuster]</span>									
Insured: -, Co. Reg. No.: -									
Main Claimant: <b>YELLOW BUS SERVICES PTE LTD</b> , Co. Reg. No.: 200813143M									
Vehicle Reg. No.: <b>PC886E</b>		Date of Loss: 01/10/2018 10:00 - :59 [82 Months and 7 Days From LTA Reg Date (Man Yr)]							
Claim Type: <b>TP / MCT18100006</b>		Policy/Cover Note No.: MCOM0015							
Vehicle Reg. No. (Insured): <b>SHA4352H</b>		Policy No. (Claimant):							
		Excess:							
Repairer: <b>Yellowbus Workshop &amp; Trading Pte Ltd (HQ)</b> 160 SIN MING DRIVE, #01-07 SIN MING AUTO CITU, 575722 Sin Ming - Tel: 98335843									
Handling Insurer: <b>India International Insurance Pte Ltd (HQ)</b> - Tel: 63476100 ... [Handled by <b>Sherini Pillai</b> ]									
Adjuster: <b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>ONG HWEE JIE</b> ] ... <b>[Final Rpt due 03/12/2018]</b>									
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

**\*PC886E (MCT18100006)**  
**[SHA4352H]**  
**TP**  
**YELLOW BUS SERVICES PTE LTD**  
**Oct 1 2018 10:00AM**  
**[-]**  
**Yellowbus Workshop & Trading Pte Ltd**

<a href="#">Upload Documents</a>   <a href="#">Upload Photos</a>   <a href="#">Compose New Letter</a>			<b>View</b> <a href="#">View in Browser</a>	
<b>Video</b>			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	10/12/18 10:47	<b>Video - Accident</b> From TP	Load MP4	
2	10/12/18 10:48	<b>Video - Accident</b>	Load MP4	
<b>Photos/Images</b>			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	07/12/18 13:54	<b>General View</b>	Load PDF	
2	07/12/18 13:54	<b>Photographs of Damaged Parts</b>	Load PDF	
3	07/12/18 13:55	<b>Photo After Spray</b>	Load PDF	
<b>Documentation</b>			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)	Thumbnail	Print
1	23/11/18 09:19	<b>Singapore Accident Statement</b>	Load PDF	
2	10/12/18 10:36	<b>Letter of Demand from Third Party</b> KSCGP	Load PDF	

## Documents Checklist

<b>DOCUMENTS CHECKLIST</b>		<a href="#">Reset</a>   <a href="#">Save</a>   <a href="#">Print</a>
There are no document checklists configured.		
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>		
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>		



## 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/III18021086/JCBE2

Date: 10/12/2018

## REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No:

MCOM0015

Claimant Vehicle  
No : PC886E

Insured Vehicle No : SHA4352H

Date of Loss: 01/10/2018

Nature of Claim:

TP

Claim No: MCT18100006

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: PC886E

Make &amp; Model: HIGER KLQ6916Q, 6.7 D (M)

Engine No: ISBE4225B21960412

Reg. Date: 24/11/2011 (Man. Year: 2011)

Chassis No: LKLR1ESC7BA569584

Colour: Yellow

Odometer: 337663 km

Engine Capacity: 6692 cc

Market Value/New Car Price: N/A

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

## CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable):

Yes

Footbrake (Serviceable):

Yes

Handbrake (Serviceable): Yes Engine Modification:

No

Pre-accident Condition:

## CONDITION OF TYRES

Front Tyre Size: 225/70 R22.5

Rear Tyre Size: 225/70 R22.5

Front Left Side: Bridgestone 8 mm

Rear Left Side: Bridgestone 8 mm

Front Right Side: Bridgestone 8 mm

Rear Right Side: Bridgestone 8 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: 21/11/2018

Date Inspected: 22/11/2018 Inspected At:

Yellowbus Workshop & Trading Pte Ltd  
(HQ)

160 SIN MING DRIVE, #01-07 SIN MING

AUTO CITU

Singapore 575722

Estimated Period of Repair: 0.0 days

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.

## REPAIR DETAILS

### Reference

<b>Part Source:</b>	(Last Synchronised: 10 Dec 2018)	
<b>Parts:</b>	N/A	HIGER KLQ6916Q 6.7 D (M) (Model not available in database)
<b>Labour:</b>	Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for PC886E)	
<b>Validity:</b>	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	
<b>Further Info:</b>	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.
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< END OF ESTIMATES >