

ASS. REC. BY:

REF: CS / FWD18021209 / K6b821

Special Instruction:

Surveyor

Kannth

ASSIGNMENT (Office)

From (Person):

Lionel Tan

of

FWD

Date/Time:

23/11/2018 952am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLP 5237A

Insured:

SJX 3715G.

at Workshop m/s

RC Auto

Tel:

9761 9383

of

160 Sin Ming Drive #06-20

Policy No:

Claim No:

1201800013326 / JL

Sum Insured:

Excess:

Make of Veh:

D.O.A.

15/10/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS 'Wp'

H.O.D. Endorsement:

Date/Time:

23-11-2018 1124am

Person Contacted:

Mr. Tan

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SLP 5237A - X

SJX 3715G - X

26/11/18

@ 17:07 p.m. revised IA to FWD via mr. tan.

13/12

@ 306P.m email &amp; confirm

ASS. REC. BY:

REF: *FWD /**Kenneth*

## ASSIGNMENT

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

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

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

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

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

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

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

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

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

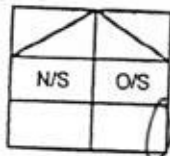
Excess: \_\_\_\_\_

(Client's Record)

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

(Policy Condition)

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



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

IDAC Accident Rpt: \_\_\_\_\_

Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_

Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_

*02* days

Res.: Yes or No

Lum Sum: \_\_\_\_\_

*1-B-1%*

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

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

Vehicle: IN / OUT

Veh No: \_\_\_\_\_

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

Truck / Trailer or \_\_\_\_\_

Make: \_\_\_\_\_

Colour: \_\_\_\_\_

Sp. Reading \_\_\_\_\_

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

C/No: \_\_\_\_\_

Gen. Cond: *Good* / Fair / Poor / BurntSteering: *In order* / Jammed / Leaked / Burnt orBrake: *In order* / Jammed / Leaked / Burnt orMod: *NII* / S/Rim / STD / Rrim or

Tyre Size: \_\_\_\_\_

F: \_\_\_\_\_

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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

R/Bal. \_\_\_\_\_

mm

L/Bal. \_\_\_\_\_

mm

D.O.A. \_\_\_\_\_

Survey held at \_\_\_\_\_

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

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

Date / Time

Action / Instruction

*26/11**File pass to Catherine**14/12/18**Confirmed P/LP \$ 3,069.00 @ 2 days with Kenneth.  
(\$ 550.00 Red - 15%)*

RECEIVED 14 DEC 2018

Date/Time, File Page 10?

*14/12/18*1) *Typist*

Date/Time, File Return 10?

2) \_\_\_\_\_



: Prell. Report



: Final Report

Days Of Repair: *2*Resurvey No. of Trip: *1*Add Fee: ☐

: Site Insp (\$



: Interview (\$



: Tech Invs (\$



: Weekend (\$

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS. SI

Fixtures

Others

TOTAL

Report Format :

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

*3,069.00 P/LP*

|     |
|-----|
| 200 |
| 50  |
| 50  |
| 10  |
| 310 |

*[Signature]*  
14/12/2018

**Catherine Chong (LKK Auto)**

---

**From:** lionel.tan@fwd.com  
**Sent:** Friday, 23 November, 2018 9:52 AM  
**To:** assignments@lkkauto.com; sur@lkkauto.com  
**Cc:** motorclaims.sg@fwd.com  
**Subject:** FW: 2nd Notice to Conduct Pre-repair Survey; Our Ref: SLP5237A/RCA/jp/ps Your Ref: 1201800013326/JL  
**Attachments:** 2nd PRS RCA.pdf

Please attend to attached TPRS notice.

Regards,  
Lionel

**From:** Accident@kscgp.com [mailto:Accident@kscgp.com]  
**Sent:** Thursday, November 22, 2018 9:45 PM  
**To:** Lionel Tan Tian Pei - SGUser  
**Cc:** jiapei@kscgp.com  
**Subject:** 2nd Notice to Conduct Pre-repair Survey; Our Ref: SLP5237A/RCA/jp/ps Your Ref: 1201800013326/JL

Dear Sirs,

We refer to your email below and subject above.

Please find the enclosed 2nd Pre-repair Survey herewith.

Thank you.

Regards,  
Sampu  
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:** [lionel.tan@fwd.com](mailto:lionel.tan@fwd.com) [mailto:[lionel.tan@fwd.com](mailto:lionel.tan@fwd.com)]  
**To:** [Accident@kscgp.com](mailto:Accident@kscgp.com)  
**Cc:** [motorclaims.sg@fwd.com](mailto:motorclaims.sg@fwd.com)

**Sent:** Thu, 22 Nov 2018 09:48:57 +0000

**Subject:**

**Without Prejudice**

Dear Sir/ Madam

Please find our panel surveyors as follows: -

1. LKK AUTO CONSULTANTS PTE LTD
2. INFINITI APPRAISAL SERVICE
3. AJAX INSPECTION SERVICES PTE LTD
4. VICOM LTD
5. APPRAISALS ASSOCIATES PTE LTD

Regards,  
Lionel

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

**Sent:** Thursday, 22 November, 2018 5:23 PM

**To:** Motor Claims SG - SG Common

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

**Subject:** Notice to Conduct Pre-repair Survey; Our Ref: SLP 5237A/RCA/jp/ps Your Ref: SJX 3715G Our Ref: 1201800013326/JL

Dear Sirs,

We refer to the subject above.

Please find the enclosed Notice to Conduct Pre-repair Survey herewith.

Thank you.

Regards,  
Sampu

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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use, disclose, copy or store this email and any attachments.

Messages and attachments are scanned for all viruses known. However, you are advised that you open any attachments at your own risk. If this message contains password-protected attachments, the files have NOT been scanned for viruses by our mail domain. Please always scan for viruses before opening any attachments.

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Messages and attachments are scanned for all viruses known. However, you are advised that you open any attachments at your own risk. If this message contains password-protected attachments, the files have NOT been scanned for viruses by our mail domain. Please always scan for viruses before opening any attachments.

Your Ref : 1201800013326/JL

Our Ref : SLP 5237A/RCA/jp/ps

Date : 22 November 2018

Fax: 6538 3708

DID: 3152 0989

Email: [accident@kscgp.com](mailto:accident@kscgp.com)

FWD Singapore Pte Ltd

By Email Only

Dear Sirs,

**DATE OF ACCIDENT: 15 OCTOBER 2018**

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

We refer to your email dated 22 November 2018.

Please be informed that our client is agreeable to appointing LKK Auto Consultants Pte Ltd.  
The said vehicle can be surveyed / inspected at:

Address : RC Auto  
160 Sin Ming Drive  
#06-20 Sin Ming Autocare  
Singapore 575722

Contact Person/Hp/Tel : Mr Tan Chuan Kim / 9761 9383

Kindly acknowledge upon inspection in the acknowledgement box below.

Yours sincerely,

*PS*

Your Ref : 1201800013326/JL  
Our Ref : SLP 5237A/RCA/jp/ps  
Date : 22 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:

**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

To: FWD Singapore Pte. Ltd.  
6 Temasek Boulevard  
#18-01 Suntec Tower 4  
Singapore 038986

From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn:

Date: 26 Nov 2018

**Preliminary Advice**

|                    |  |                         |              |
|--------------------|--|-------------------------|--------------|
| Insured Vehicle No | : SJX3715G   | Accident Date           | : 15/10/2018 |
| TP Vehicle No      | : SLP5237A   | Assignment Date         | : 23/11/2018 |
| Make               | : TOYOTA COROLLA ALTIS   | Est. Duration of Repair | : 2 days     |
| Date of Inspection | : 23/11/2018   |                         |              |
| Inspection At      | : R C Auto (HQ)<br>Blk 18 Sin Ming Industrial Estate Sector A #01-43<br>Singapore 575676 |                         |              |

**Point of Impact / General Description of Damages**

The vehicle sustained impact / damages o/s rear portion and parts claimed are consistent to the accident.

|                             |      |          |
|-----------------------------|------|----------|
| Repairer's Estimate (Gross) | :S\$ | 3,619.00 |
| Revised Amount              | :S\$ | 2,007.00 |
| Check Items (Estimated)     | :S\$ | 300.00   |
| Total                       | :S\$ | 2,307.00 |

Lump Sum Repair :S\$

**Total Loss Consideration**

|                    |      |
|--------------------|------|
| New for Old Value  | :S\$ |
| Pre-Accident Value | :S\$ |
| COE / PARF Rebate  | :S\$ |
| Salvage Value      | :S\$ |
| Margin for Repair  | :S\$ |

**Remarks**

- ( ) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- ( ) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- ( X ) Other comments : TP : WP



## 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 16/10/2018 16:47  
 Date Of Accident 15/10/2018 22:05  
 Exact Location Of Accident ALONG RAFFLES QUAY  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SLP5237A

**Insured/Policyholder**

Name Of Registered Owner BETSIE PTE LTD  
 Co Reg No 200804209Z  
 Email Address NOEMAIL  
 Mobile Phone No (LOCAL) +65-96611648  
 Alternative Phone No OFFICE-96611648

**Vehicle Particulars**

Manufacturer MERCEDES-BENZ  
 Model CLA200  
 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? NO

If No, Please state action to be taken THIRD PARTY  
 PRIVATE CAR

Vehicle Category

**Insurance Company**

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.  
 Type Of Coverage COMPREHENSIVE  
 Fleet Policy NO  
 Policy Number 1700013669-01  
 Cover Note Number

**Driver**

Name of Driver GOH HWEE HOON  
 NRIC No S7125870Z  
 Date Of Birth 30/07/1971  
 Occupation INDOOR  
 Date Of Driving Pass 16/11/1994  
 Driving Experience 23 YEARS AND 10 MONTHS  
 Gender FEMALE  
 Mobile Number (LOCAL) +65-96611648  
 Fax Number  
 Contact Number  
 Email Address NOEMAIL

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

#### 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

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



Policyholder's Signature  
Date & Time

Driver's Signature  
(If driver is not the policyholder)  
Date & Time 15/10/2018 1436

**Kerlyn Ong Kai Li**  
DID : 6771 4420 HP : 9186 5113  
Email: kerlyn.ong@cyclecarriage.com.sg  
Cycle & Carriage Insurance Pte Ltd  
Customer Service Centre Personnel's  
Name: KERLYN  
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



I WAS DRIVING MY CAR (SLP5237A) ALONG RAFFLES QUAY. I WAS TRAVELLING AT THE 3RD LANE WHICH ALLOW ME TO TURN RIGHT OR GO STRAIGHT. AS I PROCEED TO TURN RIGHT, VEHICLE B (SJX3715G) ON MY RIGHT LANE WHICH ARE ONLY ALLOWED TO TURN RIGHT HAD WENT STRAIGHT AND COLLIDED ONTO MY RIGHT REAR PORTION.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)



Policyholder's Signature  
Date & Time

Driver's Signature  
(If driver is not the policyholder)  
Date & Time 16/10/2018 1436

Kerlyn Ong (N.D.)  
DID: 6771 4420 HP  
Email: kerlyn.ong@...  
Cycling Centre Personnel's  
Custom Name: KERLYN  
NRIC/FIN No.:

|   |   |
|---|---|
| Address   | BLK 501 ANG MO KIO AVE 5 #06-3714 SINGAPORE |
| Postcode  | 560501                                      |
| 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   | SIDE SWIPE |
| 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?   | NO |
| 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 ATTACHED

#### Attachment(s)

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

Not Authored  
Review <sup>by</sup> ~~the~~ Print  
2 days

83069.00

Tel : 97619383    Email: [rcauto5555@gmail.com](mailto:rcauto5555@gmail.com)

SLP 5237 A

Date : 23/11/2018

✓  
✓  
✓  
✓  
X  
✓  
2501  
2001

for **RC AUTO**

E.&O.E.

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation

Authorized Signature \_\_\_\_\_

- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Referrer

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

### CLAIM SUBFOLDER TRACKING

| Case | Notified                                | Est. Submitted | Adj. Assigned                                     | Adj. Rpt   | Adj. Submitted                                 | Ins. Auth'd | Status  |
|------|---|----------------|---|--|--|-------------|---|
| Main | 17 Oct 2018<br><a href="#">Edit Reg</a> |                | 23 Nov 2018 00:00<br><a href="#">Edit Adj Rpt</a> | <b>S\$3,069.00</b><br><a href="#">Edit Estimates</a> | <b>S\$3,069.00</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 adjuster]

|                             |   |                        |   |  |  |
|-----------------------------|---|------------------------|---|--|--|
| Insured:                    | Lee Siang San, ID: S7343237E  |                        |   |  |  |
| Main Claimant:              | -   |                        |   |  |  |
| Vehicle Reg. No.:           | SLP5237A  | Date of Loss:          | 15/10/2018 22:00 - :59<br>[16 Months and 7 Days From LTA Reg Date (Man Yr)] |  |  |
| Claim Type:                 | TP / 1201800013326  | Policy/Cover Note No.: | PNPV201-00008740 (TP, Fire & Theft)   |  |  |
| Vehicle Reg. No. (Insured): | SJX3715G  | Policy No. (Claimant): |   |  |  |
|                             |   | Excess:                |   |  |  |
| Repairer:                   | R C Auto (HQ) Blk 18 Sin Ming Industrial Estate Sector A #01-43, 575676 Sin Ming - Tel: 64588878                |                        |   |  |  |
| Handling Insurer:           | FWD Singapore Pte. Ltd. (HQ) - Tel: 6727 5700 ... [Handled by Josey Loh]  |                        |   |  |  |
| Adjuster:                   | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KENNETH KONG] ... [Final Rpt due 04/12/2018] |                        |   |  |  |

### 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

**\*SLP5237A (1201800013326)**  
**[SJX3715G]**

**TP**

**Oct 15 2018 10:00PM**

**[Lee Siang San]**

**R C Auto**

**View**

| Assessment Reports |                |                                   | 1 per page | <input checked="" type="checkbox"/> |
|--------------------|----------------|-----------------------------------|------------|-------------------------------------|
| No                 | Finalized On   | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail  | Print                               |
| 1                  | 26/11/18 17:07 | <b>Adjuster Immediate Advice</b>  | Load HTM   |                                     |

| Photos/Images |                 |                                   | 3 per page | <input checked="" type="checkbox"/> |
|---------------|-----------------|-----------------------------------|------------|-------------------------------------|
| No            | Relabel/Reorder | LKK Auto Consultants Pte Ltd (HQ) | Thumbnail  | Print                               |
| 1             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 2             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 3             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 4             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 5             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 6             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 7             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 8             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 9             | 14/12/18 10:38  | <b>General View</b>               | Load JPG   | <input checked="" type="checkbox"/> |
| 10            | 14/12/18 10:38  | <b>Odometer Reading</b>           | Load JPG   | <input checked="" type="checkbox"/> |
| 11            | 14/12/18 10:38  | <b>Chassis Number</b>             | Load JPG   | <input checked="" type="checkbox"/> |
| 12            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |
| 13            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |
| 14            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |
| 15            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |
| 16            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |
| 17            | 14/12/18 10:38  | <b>Reinspection Photo</b>         | Load JPG   | <input checked="" type="checkbox"/> |

## Documents Checklist

| DOCUMENTS CHECKLIST                          | <input type="button" value="Reset"/> | <input type="button" value="Save"/> | <input type="button" value="Print"/> |
|--|--------------------------------------|-------------------------------------|--------------------------------------|
| There are no document checklists configured. |                                      |                                     |                                      |

**Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)**

**Show Remarks To:** ☐ Handling Insurer

Note: Remarks are private unless you show it to other parties.





## LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/FWD18021209/KSBS2

Date: 28/12/2018

## REFERENCE

Handling Insurer: FWD Singapore Pte. Ltd. Policy No: PNPV201-00008740  
 Claimant Vehicle No: SLP5237A Insured Vehicle No: SJX3715G  
 Date of Loss: 15/10/2018 Nature of Claim: TP Claim No: 1201800013326

## DESCRIPTION &amp; IDENTIFICATION OF VEHICLE

Reg No: SLP5237A  
 Make & Model: MERCEDES-BENZ CLA 200, 1.6 SHOOTING BRAKE (R18 BI) (A) Engine No: 27091031142232  
 Reg. Date: 08/06/2017 (Man. Year: 2016) Chassis No: WDD1173432N446731  
 Colour: Metallic Silver Odometer: 38180 km  
 Engine Capacity: 1595 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: 225/40R18 Rear Tyre Size: 225/40R18  
 Front Left Side: Bridgestone 6 mm Rear Left Side: Bridgestone 6 mm  
 Front Right Side: Bridgestone 6 mm Rear Right Side: Bridgestone 6 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS           | Repairer's      | Adjuster's      | Difference    | Diff %       |
|--------------------------|-----------------|-----------------|---------------|--------------|
| Parts                    | 2,829.00        | 2,529.00        | 300.00        | 10.60        |
| Miscellaneous Items      | 0.00            | 0.00            | 0.00          |              |
| Labour                   | 790.00          | 540.00          | 250.00        | 31.65        |
| Paintwork Labour         | 0.00            | 0.00            | 0.00          |              |
| Towing                   | 0.00            | 0.00            | 0.00          |              |
| <b>Nett Amount (S\$)</b> | <b>3,619.00</b> | <b>3,069.00</b> | <b>550.00</b> | <b>15.20</b> |

## INSPECTION

Date of Assignment: 23/11/2018  
 Date Inspected: 23/11/2018 Inspected At: 160 SIN MING DRIVE #06-20  
 Estimated Period of Repair: 2.0 days Repairer: R C Auto

Adjuster: KENNETH KONG

Manager: Hiew May Fung

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

## REPAIR DETAILS

### Reference

**Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 28 Dec 2018)

**Parts:** 143 MERCEDES-BENZ CLA 200 1.6 SHOOTING BRAKE (R18 BI) (A) (Catalogue:Merimen Singapore 1.0)

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

**Print Code:** (Unsubmitted, no print-code for SLP5237A)

**Validity:** These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page

**Further Info:** Items/values not in reference catalogue are prefixed with an asterisk \*.

### Recommended Parts

| No. | Qty | Part No. | Particulars                 | Condition        | Repairer's  | Amount       |
|-----|-----|----------|-----------------------------|------------------|-------------|--------------|
| 1   | 1   |          | *REAR BUMPER                | Buckled / Dented | 1,180.00 FL | *1,180.00 FL |
| 2   | 1   |          | *REAR BUMPER REVERSE SENSOR | Dented           | 280.00 FL   | *280.00 FL   |
| 3   | 1   |          | *SPORTS RIM                 | Dented           | 1,350.00 FL | *1,350.00 FL |
| 4   | 1   |          | *TYRE                       | Serviceable      | 300.00 FS   | *- FS        |

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

|   |                 |                 |
|---|-----------------|-----------------|
| <b>Sub Total (S\$)</b>                                    | <b>3,110.00</b> | <b>2,810.00</b> |
| <b>- List Item Discount on L Items 10.00/10.00% (S\$)</b> | 281.00          | 281.00          |
| <b>Total Parts (S\$)</b>                                  | <b>2,829.00</b> | <b>2,529.00</b> |

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

| No                              | Particulars                          | Lab.Type | Repairer's    | Amount        |
|---------------------------------|--------------------------------------|----------|---------------|---------------|
| <b>Labour Items</b>             |                                      |          |               |               |
| 1                               | WHEEL ALIGNMENT.                     | New      | 60.00         | 60.00         |
| 2                               | TO CHECK WIRING FOR SENSOR.          | New      | 30.00         | 30.00         |
| 3                               | SPRAY PAINTING.                      | New      | 300.00        | 250.00        |
| 4                               | LABOUR CHARGES TO RENEW ABOVE PARTS. | New      | 400.00        | 200.00        |
| <b>Gross Labour Cost (\$\$)</b> |                                      |          | <b>790.00</b> | <b>540.00</b> |

Report was unsubmitted during this print-out.

< END OF ESTIMATES >