

15/5/2010

INS. CASE OWNER:

CC 8/LPC1802

LKK:
IDAC:

Surveyor:

Tantikh

DOI:

ASSIGNMENT

12/17/18

Date / Time:

28/11/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GBE 8772C

Name of Insured:

DINO CORPORATION PH

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

27/11/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

SUBHAKH

CANNON

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

15/15/18/200/01145

Policy No.:

15/15/18/200/01145

Make / Model:

MITSUBISHI

Place of Accident:

MNL AMK MK 1 & MK 3

OI GLA REPORT: YES / NO

YES / NO ; TP GLA REPORT: YES / NO

Insured Liability:

Final ? Yes / No

INSRS:
WSP:
Tel:
Liability:
RMKS:

performance

INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time		STAGE	DATE / PIC
28.11.18	SKP 42651 - x	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
29.3.19	FILE PASS TO TYPST TO PREPARE REPORT.	Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	<input type="checkbox"/>
		After call ltr to OI:	<input type="checkbox"/>
		Authorisation To Act:	<input checked="" type="checkbox"/>
		Release Voucher:	<input checked="" type="checkbox"/>
		Final Repair Bill:	<input checked="" type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>
		Towing Invoice:	<input type="checkbox"/>
		LTA / GLA:	<input checked="" type="checkbox"/>
		Medical Bill:	<input type="checkbox"/>
		PIR:	<input type="checkbox"/>
		Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
		LOD:	<input checked="" type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>
		Post-Repair Photos:	<input checked="" type="checkbox"/>
		Others:	<input type="checkbox"/>

PRELIMINARY ADVICE	Date/Time:	Sent By:	Confirm with:	Confirm by:
FINALIZATION	Date/Time: 27.3.19	Confirm with: CAROLINE	Confirm by: MTH	
Repair Cost:	PIP SS 14,634.19	(9 days) Reduction:	%	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: 20.06.19	Confirm with: CAROLINE	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.:	27	If NO or B 28, Ass. Lia:
Repair Cost:	SS 19,658.58			OID REAR BENDED TP.
Loss of Rental (LOR):	SS -	(days)		
Loss of Use (LOU):	SS 840.00	(S 60 x 14 days)		
Loss of Income (LOI):	SS -	(S x days)		
LOR only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LO <input type="checkbox"/>	[Tick only one]	
GLA/LTA Search	SS 2.00			
Medical:	SS -			
Disbursement:	SS -	(e.g. Tow/ Independent)		
Legal Cost	SS -			
Total:	SS 16,500.58	Global Sum SS:		
FINAL PAYMENT	Date/Time: 20.06.19	Confirm with: CAROLINE	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
Payee 1:	SS 16,500.58	Name 1: PERFORMANCE MOTORS LIMITED		
Payee 2: (Strike if N.A.)	SS	Name 2:		
Payee 3: (Strike if N.A.)	SS	Name 3:		

SYNOPSIS

Tanglin

REF:

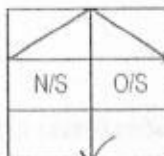
LPC

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: 976K
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 9 days Res.: Yes or No
 Lum Sum: - % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Kevin

Veh No: SRP4265L Yr Regn: 2014 Sep
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: BMW 116i C.C. 1598
 Colour: B/wh A/C: Insured / Std / NI / NA
 Sp. Reading: 53364 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WKA1A/2090PS 78784
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 225/45R17
 R: _____

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

Front: 6 mm Rear: 6 mm
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 17/12/18
 Survey held at PML

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

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

Rebate: \$ 59,312

Date / Time Action / Instruction

P/p: 414,634.19 CRED: 7

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS \$

) Photos

) Others

TOTAL

Report Format :

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

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$



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

Affiliated to Federation Internationale Des Experts En Automobile				
LONPAC INSURANCE BHD		Ref : CC4/LPC18021221/eb3		
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 23-11-2018		
		Code : LPC2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBE 8772C	Veh. Inspected	SKP 4265L	
Policy No.		Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From		Assign Date	23/11/2018	
2. Vehicle Particulars & Condition				
Make & Model		c.c	0	
Engine No.	HIDDEN	Year of Reg.		
Chassis No.		Colour		
Odometer	-	Steering		
Brakes		Modification		
General				
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre			mm	
L/H Front Tyre			mm	
R/H Rear Tyre			mm	
L/H Rear Tyre			mm	
4. Description of Damages				
5. General Information				
Accident Date	22/11/2018	Inspection Date		
Survey held at	PERFORMANCE MOTORS LTD 303 ALEXANDRA ROAD SINGAPORE 159941			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: To Be Advised
Our ref: CC4/LPC18021221/T1eb3

Date: 19.12.2018

The Motor Claims Department
M/s LONPAC INSURANCE BHD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SKP4265L

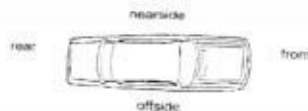
We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 17.12.2018 at the premises of M/s Performance Motors Limited and have the following to report:-

Workshop Estimate Amount	: S\$	10,309.10
Revised Estimate Amount	: S\$	6,919.65
"Check" Items Amount	: S\$	2,209.45
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the
Rear Portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 6 days

Yours faithfully,

MOHD. TAUFIKH
Licensed Appraiser

Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X



303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax: 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438160
Tel. 63190888 (AfterSales)
Fax: 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/S30 (Motorrad)
64796601 (AfterSales)
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

23 NOV 2018

E S T I M A T E

Estimate No. : b1 49212
Date Estimated : 22/11/2018
Prepared By : Kevin Leong Wai Kit

Page No. : 1 of 5

- ESTIMATE REPAIR FOR -

Zhang Li
12 Ang Mo Kio, Ave 2
#01-18

Singapore 567697

- ACCOUNT - 158

Lonpac Insurance Bhd
300 Beach Road
#17-04/07 The Concourse
Singapore 199555

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKP4265L	P578784	08/09/2014	116iA/5	0

DESCRIPTION

To replace rear bumper, rear tailgate, reinforcement & all attachments cause by accident.

VALUE

1700 2,550.00
450 ✓

Painting on rear bumper & rear tailgate

1750 1,923.00
287 ✓

To conduct water leak tests.

65 75.00 ✓

To supply and install rear windscreen solar film.

new 451 531.00 ✓

To check electrical wiring systems at the rear section for proper function.

150 177.00 ✓

To carry out body cavity preservation.
(Per panel) Tailgate

100 118.00 ✓

Sundries.

7 new 150.00 ✓

Total Labour 1: 5,524.00

DESCRIPTION

BOOTLID
REAR BUMPER CARRIER
RR BUMPER CENTER GUIDE
RR BUMPER LH SIDE GUIDE
RR BUMPER RH SIDE GUIDE
DECORATIVE STRIP (LINE URBAN)
FLAP TOWING EYE PRIMED
REAR BUMPER PRIMED (LINES)
HOLDER AERIAL
SET MOUNTS PDC SENSOR REAR
SET MOUNTS PDC SENSOR REAR
REAR W/SCREEN
HEAT INSULATOR REAR SILENCER
TRUNK LID GASKET
THIRD STOPLAMP

QTY PRIC

1	1,136.15
1	394.90
1	56.85
1	49.05
1	49.05
1	110.00
1	38.95
1	924.75
1	31.05
1	62.95
1	62.95
1	623.15
1	34.05
1	125.45
1	174.15

VALUE

bt 1,136.15 ✓
? 394.90 ✓ bt
dl 56.85 ✓ 60.30
un 49.05 ✓
un 49.05 ✓
un 110.00 ✓
de 38.95 ✓ un
de 924.75 ✓
un 31.05 ✓
un 62.95 ✓
un 62.95 ✓
hel 623.15 ✓
un 34.05 ✓
hel 125.45 ✓
un 174.15 ✓

Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W GST Reg. No M2-0020081-X



303, Alexandra Road
Sime Darby Performance Centre
Singapore 159941
Tel. 63190100 (Sales & Admin)
63190111 (AfterSales)
Fax. 64747770

280, Kampong Arang Road
East Coast Centre
Singapore 438180
Tel. 63190888 (AfterSales)
Fax. 63449773

315, Alexandra Road
Sime Darby Business Centre
Singapore 159944
Tel. 63190528 (AfterSales)
63190533/530 (Motorrad)
Fax. 64796601 (AfterSales)
64796624 (Motorrad)

GST REG. NO : M2 - 0020081 - X

ESTIMATE

Estimate No. : b1 49212
Date Estimated : 22/11/2018
Prepared By : Kevin Leong Wai Kit

Page No. : 2 of 5

REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKP4265L	P578784	08/09/2014	116iA/5	0

DESCRIPTION	QTY	PRIC	VALUE
NUMBER PLATE LIGHT LED	2	23.80	47.60
DECOUPLING RING PDC TORQUE CONVERTE	4	5.05	20.20
RR PDC SENSOR BLACK SAPPHIRE (475)	2	236.85	473.70
(DG) CLEANER R1 (100ML)	1	26.15	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR)	2	131.55	263.10
(DG/SL) ADHESIVE SET K6	1	53.05	53.05
(DG/SL) GLASS PRIMER 30ML (VP206)	1	27.85	27.85

Total Parts : 4,785.10

Claims OD / 3rd Party / Uninsured losses / Direct Settlement

Regn No. _____ Claim No. _____
Date & Time 17/12/2014 Express S/S _____
Surveyor's Name Taylor Sign: Taylor
Surveyor's Tel 9749 5749 Authorised Yes / No _____
Authorised Date 'wp' Time _____
RESURVEY PARTS PHOTO BY SURVEYOR Yes / No PML Yes / No _____
Surveyor's E-mail Taylor@lkkauto.com
No. of Working Days Recommend 6 days

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Labour 1	:	5,524.00
Parts	:	4,785.10
Labour 2	:	0.00
Excess	:	0.00
Total GST @ 7%	:	721.64
Grand Total	:	11,030.74

** THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY**

** PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE **

15565.79

Performance Motors Limited

A member of the Sino Darby Group
Co. Reg. No. 197401559W. GST Reg. No. M2-0020081-X



SUPPLEMENTARY

Estimate No. : b1 49212
Date Estimated : 22/11/2018
Prepared By : Kevin Leong Wai Kit

Page No. :

REPAIR FOR -
Zhang Li
12 Ang Mo Kio, Ave 2
#01-18

- ACCOUNT - 158
Lonpac Insurance Bhd
300 Beach Road
#17-04/07 The Concourse
Singapore 199555

Singapore 567697

REGN NO	CHASSIS NO	REGN DATE	MODEL	M LEAGE
SKP4265L	P578784	08/09/2014	116iA/5	0

DESCRIPTION	ORIGINAL PRICE	DISC. %	NETT	
# To remove and install boot compartment carpet and garnish to facilitate repairs	231.00		231.00 <i>rel</i>	
# To replace rear windscreen glass	574.00		574.00 <i>rel</i>	
# To supply rear emboss number plate	83.00		83.00 <i>bt</i>	
# To mount vehicle on speed bench to facilitate the re-alignment of body/chassis in accordance with BMW specifications.			564.00 <i>* photo</i>	
DESCRIPTION	UNIT PRICE	QTY	DISC. %	NETT
# TAIL END PANEL *	497.45	1.00		497.45 <i>bt</i> ✓
# BLIND RIVET AVIBVLB *	0.55	30.00		16.50 <i>rel</i> ✓
# SCREW (SF PLUS M5X15) *	0.55	20.00		11.00 <i>rel</i> ✓
# (DG/SL) BODY ADHESIVE K5B (195ML) *	326.80	1.00		326.80 <i>rel</i> ✓
# PUNCH RIVET N5 *	0.55	10.00		5.50 <i>rel</i> ✓
# PUNCH RIVET N4 *	0.55	10.00		5.50 <i>rel</i> ✓
# (DG) CLEANER R1 (100ML) *	26.15	1.00		26.15 <i>rel</i> ✓
# 3M SF PREMIUM REPAIR WINDSCREEN	252.34	1.00		252.34 <i>rel</i> ✓

Total Labour :	888.00
Total Parts :	888.90
Total Labour & Parts :	1,776.90

Performance Motors Limited

A member of the Sino Darby Group
Co. Reg. No. 197401559W. GST Reg. No. M2-0020081-X



FINAL REPORT

Estimate No. : b1 49212
Date Estimated : 22/11/2018
Prepared By : Kevin Leong Wai Kit

Page No. :

REPAIR FOR -
Zhang Li
12 Ang Mo Kio, Ave 2
#01-18

- ACCOUNT - 158
Lonpac Insurance Bhd
300 Beach Road
#17-04/07 The Concourse
Singapore 199555

Singapore 567697

REGN NO	CHASSIS NO	REGN DATE	MODEL	M LEAGE	
SKP4265L	P578784	08/09/2014	116iA/5	0	
DESCRIPTION	ORIGINAL PRICE	DISC. %	NETT		
* To replace rear bumper and attachments, boot lid and attachments, tail end panel, third stoplamp include pulling and straightening on accident areas, to make good the trunk floor panel and knocking out dents caused by the accident	4250.00		4,250.00		
* To spray paint rear bumper, boot lid, tail end panel and trunk floor panel	2877.00		2,877.00		
* To conduct water leak tests	75.00		75.00		
To check electrical wiring systems at the rear section for proper function	150.00		150.00		
To carry out body cavity preservation (Per panel)	100.00		100.00		
* To carry out body cavity preservation (For cut panel)	451.00		451.00		
# To remove and install boot compartment carpet and garnish to facilitate repairs	231.00		231.00		
# To replace rear windscreen glass	574.00		574.00		
# To mount vehicle on speed bench to facilitate the re-alignment of body/chassis in accordance with BMW specifications	564.00		564.00		
# To supply rear emboss number plate	83.00		83.00		
Sundries	150.00		150.00		

DESCRIPTION	UNIT PRICE	QTY	DISC. %	NETT
# 3M S/F PREMIUM REAR WINDSCREEN	252.34	1.00		252.34
BOOTLID	1,136.15	1.00		1,136.15
# TAIL END PANEL *	497.45	1.00		497.45

Performance Motors Limited

A member of the Sime Darby Group
Co. Reg. No. 197401559W. GST Reg. No. M2-0020081-X



FINAL REPORT

REAR BUMPER CARRIER	394.90	1.00	394.90
RR BUMPER CENTER GUIDE	66.30	1.00	66.30
DECORATIVE STRIP (LINE URBAN)	110.00	1.00	110.00
REAR BUMPER PRIMED (LINES)	924.75	1.00	924.75
SET MOUNTS PDC SENSOR REAR	62.95	1.00	62.95
REAR W/SCREEN	623.15	1.00	623.15
TRUNK LID GASKET	125.45	1.00	125.45
THIRD STOPLAMP	174.15	1.00	174.15
# BLIND RIVET AVIBVLB *	0.55	30.00	16.50
# SCREW (SF PLUS M5X15) *	0.55	20.00	11.00
# (DG/SL) BODY ADHESIVE K5B (195ML) *	326.80	1.00	326.80
# PUNCH RIVET N5 *	0.55	10.00	5.50
# PUNCH RIVET N4 *	0.55	10.00	5.50
# (DG) CLEANER R1 (100ML) *	26.15	1.00	26.15
(DG) CLEANER R1 (100ML)	26.15	1.00	26.15
(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR)	131.55	2.00	263.10
(DG/SL) ADHESIVE SET K6	53.05	1.00	53.05
(DG/SL) GLASS PRIMER 30ML (VP206)	27.85	1.00	27.85

SUPPLEMENTARY ITEMS

Total Labour :	9,505.00
Total Parts :	5,129.19
Total Labour & Parts :	14,634.19
Deduction for Excess :	0.00
Total Repair Costs less Excess:	14,634.19
GST @7%:	1,024.39
Grand Total :	15,658.58

Catherine Chong (LKK Auto)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Sent: Friday, 23 November, 2018 10:41 AM
To: Admin-D (LKKAuto)
Cc: MT_Claim_SG; PBSP
Subject: FW: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018
Attachments: SKM_558e18112308190.pdf; SKP4265L(NOV).PDF

Our Ref : 18/18/18/VC00/021145

Dear Catherine,

Kindly proceed to survey and revert to them on Direct Settlement.

Best Regards
Gerald Poh
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

*23-11-2018 @ 11:22am
Caroline wh not in.*

From: PBSP [mailto:pml-pbsp@sime-darby.com.sg]
Sent: Friday, 23 November, 2018 8:24 AM
To: MT_Claim_SG; GERALD POH WEE BIN; ericwoo
Subject: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Dear Sirs,

We refer to the above matter.

We have instructions from our client to seek repair cost and loss of use/car rental from you through Direct Settlement.

Attached is the estimates and supporting documents for your consideration.

Please let us have your confirmation that you agree that liability is clear and we may proceed with Direct Settlement.

If Direct Settlement is approved, kindly let us have your offer for LOU / rental.

Thank you.

Regards,
Caroline
C/o Performance Motors Limited - Body and Paint
303 Alexandra Road Singapore 159941
DID: 6319 0174 Fax: 6479 4601

"This electronic mail content and any accompanying attachments ("the Message") is intended only for the named addressee ("the Recipient") and may contain information that is confidential, privileged and/or proprietary to the Sime Darby group of companies ("Sime Darby") and/or protected under applicable laws.

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Shu Pei (LKKAUTO)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Sent: Friday, 23 November 2018 3:03 PM
To: Shu Pei (LKKAUTO)
Cc: MT_Claim_SG
Subject: RE: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018
Attachments: 23112018145945.pdf

Our Ref :18/18/18/VC00/021145

Dear Shu Pei,

Attached copy of insured's GIA report for your attention.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: Shu Pei (LKKAUTO) [mailto:shupeil@lkkauto.com]

Sent: Friday, 23 November, 2018 2:49 PM

To: GERALD POH WEE BIN

Cc: MT_Claim_SG; Admin A; Asher Sng (LKKAUTO)

Subject: RE: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

WITHOUT PREJUDICE

Dear Sir / Madam,

We refer to the above matter.

Kindly let us have a copy of your insured's GIA report for our necessary action.

Our case handler in-charge is Asher and she can be contacted at DID: 6841 6051.

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

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

From: Admin-D (LKKAuto)
Sent: Friday, 23 November 2018 11:24 AM
To: 'GERALD POH WEE BIN' <geraldpoh@lonpac.com>
Cc: 'MT_Claim_SG' <mt_claim@lonpac.com>; Admin A <admin-a@lkkauto.com>; assignments <assignments@lkkauto.com>
Subject: RE: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Dear Mr Gerald,

Thank you for the assignment.

Please be informed that vehicle currently not in the workshop, repairer will arrange.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: GERALD POH WEE BIN [<mailto:geraldpoh@lonpac.com>]
Sent: Friday, 23 November, 2018 10:41 AM
To: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Cc: MT_Claim_SG <mt_claim@lonpac.com>; PBSP <pml-pbsp@simedarby.com.sg>
Subject: FW: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Our Ref : 18/18/18/VC00/021145

Dear Catherine,

Kindly proceed to survey and revert to them on Direct Settlement.

Best Regards

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd

300 Beach Road, #17-04/07 The Concourse, Singapore 199555

Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: PBSP [<mailto:pml-pbsp@simedarby.com.sg>]
Sent: Friday, 23 November, 2018 8:24 AM
To: MT_Claim_SG; GERALD POH WEE BIN; ericwoo
Subject: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Dear Sirs,

We refer to the above matter.

We have instructions from our client to seek repair cost and loss of use/car rental from you through Direct Settlement.

Attached is the estimates and supporting documents for your consideration.

Please let us have your confirmation that you agree that liability is clear and we may proceed with Direct Settlement.

If Direct Settlement is approved, kindly let us have your offer for LOU / rental.

Thank you.

Regards,
Caroline
C/o Performance Motors Limited - Body and Paint
303 Alexandra Road Singapore 159941
DID: 6319 0174 Fax: 6479 4601

"This electronic mail content and any accompanying attachments ("the Message") is intended only for the named addressee ("the Recipient") and may contain information that is confidential, privileged and/or proprietary to the Sime Darby group of companies ("Sime Darby") and/or protected under applicable laws. If you are not the intended Recipient, you are strictly prohibited from using, disseminating, forwarding and/or printing the Message. Please notify the sender immediately by return e-mail and permanently delete all copies of the Message. Sime Darby disclaims all liability for any error, loss or damage arising from the Message being infected by computer virus or other malicious software. Any views and/or opinions expressed in the Message are solely those of the author's and do not necessarily represent those of Sime Darby's."

GERALD POH WEE BIN

From: GERALD POH WEE BIN
Sent: Friday, 23 November, 2018 10:15 AM
To: ANNIE LEE
Cc: 'mt_claim@lonpac.com'; ELLYNN TAN TAI KHIM; ALLEN HO FEI LONG
Subject: POLICY NO Z/18/VP05/102441

Dear Annie,

We have registered a Motor claim under the above policy.

Kindly request the intermediary concerned to settle the outstanding premium for the following:

Policy No / Inception Date	Intermediary	Insured	Claim No / Date of Accident	Vehicle No
Z/18/VC00/102441	TAN INSURANCE BROKERS PTE LTD	DIGO CORPORATION PTE LTD	18/18/18/VC05/021145	GBE8772C
/9/2018	Z70603		22/11/2018	

Regards,

Gerald Poh

Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 255 Fax: (65) 6296 2706



LONPAC INSURANCE BHD (S98FC5635C)

Singapore Office: 000 Beach Road #17-04/07, The Concourse, Singapore 199555
Tel: (65) 6250 7388 Fax: (65) 6256 2700 Website: www.lonpac.com.sg
GST Reg No.: F8-0005635-C

Our Ref: 18/18/16/VC00/021145

Date: 23/11/2018

TAN INSURANCE BROKERS PTE LTD
3A/5A ALIWAL STREET
CHENN LEONN BUILDING
SINGAPORE 199896

Dear Sir/ Madam

Policy No: Z/18/VC00/102441
Insured: DIGO CORPORATION PTE LTD
Vehicle No: GBE 8772C
Location: ANG MO KIO AVE 1

Accident Date: 22/11/2018

We acknowledge your notification on 23/11/2018 of the above accident.

In order that we may proceed further with this matter, kindly arrange for the following information and/or documents marked (X) to be submitted to us:

- () A copy of the driver's driving licence.
- () A copy of the Police Report and/or Police Investigation Result.
- () If the driver has not reported the accident, kindly arrange for him to do so at any of our Authorised Workshops or at our office.
- () If you or your client is claiming against any third party, kindly keep us posted on the outcome of the third party claim & provide us with supporting document if your recovery is successful.
- () A cheque for the policy excess of _____ applicable under Section II of the Motor Policy for third party claims.
- () Driver's comments on the extent of injuries sustained by injured party/parties concerned.
- () Did the Police issue any Notice of Intended Prosecution and/or Notice of Traffic Offence against you or the driver. If yes, to let us have a copy before you pay any traffic fine.
- () Kindly let us have the driver's comments to the third party's claim (copy enclosed herewith) within 10 days of this letter failing which we shall proceed as we see fit.
- (✓) In the event that you/your client receives correspondences from any third party, kindly forward them to us unanswered. Do not admit liability nor make any promise or offer of settlement without our consensus.
- () We have rejected the third party claim. If you receive a Writ of Summons from the third party, please forward to us immediately.
- () Please let us have your urgent reply to our letter of _____
- () _____

We look forward to hearing from you. Please quote our file reference in future correspondence.

Thank you.

CLAIMS DEPARTMENT
LONPAC INSURANCE BHD

*** THIS IS A COMPUTER GENERATED DOCUMENT AND NO SIGNATURE IS REQUIRED. ***

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	22/11/2018 13:17
Date Of Accident	22/11/2018 07:50
Exact Location Of Accident	JUNCTION OF AMG MO KIO AVE 1 & AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE8772C
Insured/Policyholder	
Name Of Registered Owner	DIGO CORPORATION PTE LTD
Co Reg No	200313006C
Email Address	VEHICLE@DIGO.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67527477

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER FEA01BR2SDEB (CBU)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE
------------------	--------------------

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/18/VC00/102441
Cover Note Number	12/09/18 - 11/09/19

Driver

Name of Driver	SUBBAIAH KANNAN
NRIC No	G8144172W
Date Of Birth	02/07/1982
Occupation	OUTDOOR
Date Of Driving Pass	07/06/2010
Driving Experience	8 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84942484
Fax Number	
Contact Number	
Email Address	NOEMAIL

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.
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ACCIDENT STATEMENT

Date Of Report 22/11/2018 13:17
Date Of Accident 22/11/2018 07:50/
Exact Location Of Accident JUNCTION OF AMG MO KIO AVE 1 & AVE 3/
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GB08772C /
Insured/Policyholder
Name Of Registered Owner DIGO CORPORATION PTE LTD
Co Reg No 200313006C
Email Address VEHICLE@DIGO.COM.SG
Mobile Phone No
Alternative Phone No OFFICE-67527477

Vehicle Particulars

Manufacturer MITSUBISHI
Model CANTER FEA01BR2SDEB (CBU)
Exact Purpose for which vehicle was being used at time of accident COMMERCIAL 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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company LONPAC INSURANCE BHD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number Z/18/VC00/102441
Cover Note Number 12/09/18 - 11/09/19

Driver

Name of Driver SUBBAIAH KANNAN
NRIC No G8144172W
Date Of Birth 02/07/1982
Occupation OUTDOOR
Date Of Driving Pass 07/06/2010
Driving Experience 8 YEARS AND 5 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-84942484
Fax Number
Contact Number
Email Address NOEMAIL

Address C/O DIGO CORPORATION PTE LTD

Postcode

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 - HEAD TO REAR

Weather Conditions RAINING

Road Surface WET

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?

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) 6

Passenger 1 NAME: : WORKER

GENDER: : MALE

Passenger 2 NAME: : WORKER

GENDER: : MALE

Passenger 3 NAME: : WORKER

GENDER: : MALE

Passenger 4 NAME: : WORKER

GENDER: : MALE

Passenger 5 NAME: : WORKER

GENDER: : MALE

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

Car B in front jammed brake due to traffic light turned amber. I applied brake immediately but could not stop in time due to wet road surface thus colliding onto its rear. No one was injured.

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 SKP4265L/

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

ZHANG LI

NRIC/Passport Number

S7079741J

Contact Number

93884349

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

VEHICLE NO.: G8E 8772C
INSURER: Longpac
DATE & TIME: 22/11/18 @ 07:50am

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 purposes 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

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

Sketch Plan #2

SKETCH PLAN

Any mo
kio Ave3

A: 6BE8772C

B-SRP 4265L

Zhang Li

S7079741J

HP-93884349

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ang Mo Kio Ave 1

Car B in front jammed brake due to traffic light turned amber. I applied brake immediately but could not stop in time due to wet road surface thus colliding onto its rear. No one was injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

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:

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

(☒) Claim Own Policy (☐) Claim Third Party (☐) Reporting Only
(☐) Claim ODI/TP at other workshop (_____)

AUTHORISATION LETTER

Date : 22/11/2018

To : Accident Reporting Centre (ARC)

I / We hereby approve (driver's name) Subraiah Kannan
NRIC/FIN G8144172W, our employee / employee of Digo
Corporation Pte Ltd to drive our m/vehicle no. G8E8772C
and to file the accident report (Third Party claims/Own Damage Claims/Reporting-
Only) which occurred on (date) 22/11/2018 @ (time) 07-30am
along (location) Junction of Ang Mo Kio Ave 1 & Ave 3

* Relationship between Insured and driver's company: Employee

Thank you.

Regards,

X L. Kalan



* SIGN & STAMP at the above *

Name of Owner: Tan Kah Mei Digo Corporation Pte Ltd

NRIC / ROC: G969997 200313006C

Contact No: 6752 7977

Email: Vehicle@digo.com.sg

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048680
 Tel: (65) 6724 0010 Fax: (65) 6224 0056
 Operating Hours: Monday to Friday, 09:00 - 17:00
 UEN: S665300200 / GST Reg. No.: M400617735



IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MCHM15151324 Vehicle Registration No: GAE B772C
 Name (as shown on NRIC): Digo Corporation Pte Ltd NRIC/FIN/Passport No: 200313006C
 (* Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): 67527477 Mobile No.: _____
 Email Address: vehicle@digo.com.sg
 Date of Accident: 22/11/2018 Time of Accident: 07:50am
 Place of Accident: Junction of Ang Mo Kio Ave 1 & Ave 2
 Insurance Company: Longui Ins

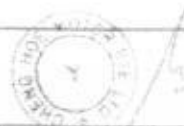
(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Insured's vehicle plate number should read as
GAE 8772C instead of GBD 8772C.

Policyholder / Driver's Signature
 Date

Reporting Centre Personnel's Signature
 Name: Sharon
 NRIC/FIN No.: _____
 Date: 23/11/18



Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Wednesday, 28 November 2018 10:28 AM
To: 'PBSP'
Subject: RE: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

'WITHOUT PREJUDICE'
SAVE AS TO COSTS

Hi Sir/Mdm,

We refer to the above matter.

Please be informed that basing on the accident statements submitted by both parties, the liability is clear / under BOLA (subject to BOLA guideline settlement) and shall proceed with direct settlement for the above mentioned case.

Please note that this e-mail is on without prejudice basis which does not amount to an authorisation of repair to your client's vehicle.

The final repair cost is subjected to the consistency of the damages according to the nature of the accident. And the days of LOU/ LOR will base on the number of days of repair as recommended by our surveyor.

Kindly take note that the case handler in-charge is Asher and she can be contacted at her DID 6841 6051

In order to expedite the claim process, please forward all relevant documents to us (LKK) to proceed on negotiate settlement.

Thank You.

Best Regards,

Asher Sng | Case Handler

LKK Auto Consultants Pte Ltd

phone: 6841-6051 | email: ashersng@lkkauto.com | fax: 6741-4108

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

From: GERALD POH WEE BIN [<mailto:geraldpoh@lonpac.com>]
Sent: Friday, 23 November, 2018 10:41 AM
To: Admin-D (LKKAUTO) <admin-d@lkkauto.com>
Cc: MT_Claim_SG <mt_claim@lonpac.com>; PBSP <pml-pbsp@simedarby.com.sg>
Subject: FW: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Our Ref : 18/18/18/VC00/021145

Dear Catherine,

Kindly proceed to survey and revert to them on Direct Settlement.

Best Regards
Gerald Poh
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: PBSP [<mailto:pml-pbsp@sime-darby.com.sg>]
Sent: Friday, 23 November, 2018 8:24 AM
To: MT_Claim_SG; GERALD POH WEE BIN; ericwoo
Subject: REQUEST FOR DIRECT SETTLEMENT - SKP4265L & GBE8772C ON 22/11/2018

Dear Sirs,

We refer to the above matter.

We have instructions from our client to seek repair cost and loss of use/car rental from you through Direct Settlement.

Attached is the estimates and supporting documents for your consideration.

Please let us have your confirmation that you agree that liability is clear and we may proceed with Direct Settlement.

If Direct Settlement is approved, kindly let us have your offer for LOU / rental.

Thank you.

Regards,
Caroline
C/o Performance Motors Limited - Body and Paint
303 Alexandra Road Singapore 159941
DID: 6319 0174 Fax: 6479 4601

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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

Affiliated to Federation Internationale Des Experts En Automobile				
LONPAC INSURANCE BHD		Ref : CC4/LPC18021221/T1eb3s2		
300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Date : 27-08-2019		
		Code : LPC2		
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GBE 8772C	Veh. Inspected	SKP 4265L	
Policy No.	Z/18/VC00/102441	Coverage (\$)	0.00	
Claim No.	18/18/18/VC00/021145	Excess (\$)	0.00	
Assign From	GERALD POH	Assign Date	23/11/2018	
2. Vehicle Particulars & Condition				
Make & Model	B.M.W. 116I	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	WBA1A12090P578784	Colour	BLACK	
Odometer	53364	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	225/45R17	PIRELLI	6 mm	
L/H Front Tyre	225/45R17	PIRELLI	6 mm	
R/H Rear Tyre	225/45R17	PIRELLI	6 mm	
L/H Rear Tyre	225/45R17	PIRELLI	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	22/11/2018	Inspection Date	17/12/2018	
Survey held at	PERFORMANCE MOTORS LTD 303 ALEXANDRA ROAD SINGAPORE 159941			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		9 Working Days		



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 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKP 4265L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	BOOTLID (SN)	BENT	1,136.15	1,136.15
1	REAR BUMPER CARRIER (SN)	BENT	394.90	394.90
1	RR BUMPER CENTER GUIDE (SN)	DEFORMED	66.30	66.30
1	RR BUMPER LH SIDE GUIDE (SN)	NOT NECESSARY	49.05	-
1	RR BUMPER RH SIDE GUIDE (SN)	NOT NECESSARY	49.05	-
1	DECORATIVE STRIP (LINE URBAN) (SN)	CUT	110.00	110.00
1	FLAP TOWING EYE PRIMED (SN)	NOT NECESSARY	38.95	-
1	REAR BUMPER PRIMED (LINES) (SN)	DEFORMED	924.75	924.75
1	HOLDER AERIAL (SN)	NOT NECESSARY	31.05	-
1	SET MOUNTS PDC SENSOR REAR (SN)	DISTORTED	62.95	62.95
1	SET MOUNTS PDC SENSOR REAR (SN)	NOT NECESSARY	62.95	-
1	REAR W/SCREEN (SN)	NECESSARY	623.15	623.15
1	HEAT INSULATION REAR SILENCER (SN)	NOT NECESSARY	34.05	-
1	TRUNK LID GASKET (SN)	NECESSARY	125.45	125.45
1	THIRD STOPLAMP (SN)	NECESSARY	174.15	174.15
2	NUMBER PLATE LIGHT LED (SN)	NOT NECESSARY	47.60	-
4	DECOUPLING RING PDC TORQUE CONVERTE (SN)	NOT NECESSARY	20.20	-
2	RR PDC SENSOR BLACK SAPPHIRE (475) (SN)	NOT NECESSARY	473.70	-
1	(DG) CLEANER R1 (100ML) (SN)	NECESSARY	26.15	26.15
2	(DG/SL) W/SCREEN SEALANT (COLD 1 HOUR) (SN)	NECESSARY	263.10	263.10
1	(DG/SL) ADHESIVE SET K6 (SN)	NECESSARY	53.05	53.05
1	(DG/SL) GLASS PRIMER 30ML (VP206) (SN)	NECESSARY	27.85	27.85
1	REAR WINDSCREEN SOLAR FILM (SN)	NECESSARY	531.00	451.00
1	SUNDRIES (SN)	NECESSARY	150.00	150.00
1	TAIL END PANEL (SN) (ADDITIONAL)	BENT	497.45	497.45
30	BLIND RIVET AVIBVLB (SN) (ADDITIONAL)	NECESSARY	16.50	16.50
20	SCREW (SF PLUS M5X15) (SN) (ADDITIONAL)	NECESSARY	11.00	11.00
1	(DG/SL) BODY ADHESIVE K5B (195ML) (SN) (ADDITIONAL)	NECESSARY	326.80	326.80
10	PUNCH RIVET N5 (SN) (ADDITIONAL)	NECESSARY	5.50	5.50
10	PUNCH RIVET N4 (SN) (ADDITIONAL)	NECESSARY	5.50	5.50

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	(DG) CLEANER R1 (100ML) (SN) (ADDITIONAL)	NECESSARY	26.15	26.15
1	3M S/F PREMIUM REAR WINDSCREEN (SN) (ADDITIONAL)	NECESSARY	252.34	252.34
1	REAR EMBOSS NUMBER PLATE (SN) (ADDITIONAL)	BENT	83.00	83.00
			6,699.79	5,813.19
	LABOUR			
	TO REPLACE REAR BUMPER, REAR TAILGATE, REINFORCEMENT & ALL ATTACHMENTS CAUSE BY ACCIDENT.		4,250.00	4,250.00
	PAINTING ON REAR BUMPER & REAR TAILGATE.		2,877.00	2,877.00
	TO CONDUCT WATER LEAK TEST.		75.00	75.00
	TO CHECK ELECTRICAL WIRING SYSTEMS AT THE REAR SECTION FOR PROPER FUNCTION.		177.00	150.00
	TO CARRY OUT BODY CAVITY PRESERVATION. (PER PANEL) TAILGATE.		118.00	100.00
	TO REMOVE AND INSTALL BOOT COMPARTMENT CARPET AND GARNISH TO FACILITATE REPAIRS. (ADDITIONAL)		231.00	231.00
	TO REPLACE REAR WINDSCREEN GLASS. (ADDITIONAL)		574.00	574.00
	TO MOUNT VEHICLE ON SPEED BENCH TO FACILITATE THE RE-ALIGNMENT OF BODY / CHASSIS IN ACCORDANCE WITH BMW SPECIFICATIONS. (ADDITIONAL)		564.00	564.00
			8,866.00	8,821.00
GRAND TOTAL			15,565.79	14,634.19
RECOMMENDED COST OF REPAIRS				14,634.19

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MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

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