

ASS. REC. BY:

REF:

CS/TP18021458/KHber

# ASSIGNMENT

Kenneth

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. \_\_\_\_\_

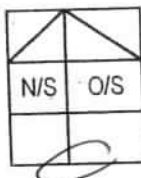
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(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: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

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

Veh No: S11D 8370G Yr Regn: 1 / 12

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

Truck / Trailer or

Make: Chrysler A Epice C.C. 1991

Colour White / Red A/C: Insured / Std / NI / NA

Sp. Reading \_\_\_\_\_ T/Radio: Insured / Std / NI / NA

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

C/No: KC1 LA 6873B

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: 195/65R15

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

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

Front

Rear

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

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

D.O.A. 10/9/13 D.O.I. 12/9/13

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

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

S11D 8370G - CS/TP18021458/KHber

OA: 171014

Submit invoice first then Survey Report

Lump Sum \$2000, 2 days (Red: 3673.04: 64%)

RECEIVED 14 DEC 2018

Date/Time, File Pass to?

Date/Time, File Return to?

1) 4/12 Typist

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

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

6) \_\_\_\_\_

Prel. Report:

Final Report:

TOTAL  
LOSS

KIV FOR  
LOD

Survey Fee:

Date:

Basic & Add.

\_\_\_ S + RS, \_\_\_ SI

Photos

Others

TOTAL

100

50+50

20

80

340

## Denise Tay (LKKAUTO)

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**From:** calvin.er <calvin.er@transcab.com.sg>  
**Sent:** Wednesday, 5 December 2018 9:30 AM  
**To:** Denise Tay (LKKAUTO)  
**Cc:** 'Ng Wai Yin'  
**Subject:** FW: III Ref:MCP121819/01/sn; ; OUR REF : AAD1309-131 (SHD 9370G) - DOA 10.9.2013; Accdt invg SHB8915C(III) & SHD9370G on 10.9.13  
**Attachments:** SHD9370G 10.09.2013 - GIA.pdf; AAD1309-131 - ESTIMATE MARKING.pdf

Dear Denise

Please refer to the preceding email.

Any updates on the survey report for this case?

Thank You  
Best Regards,  
Calvin Er  
Finance Department  
TEL: 6603 1265 Ext.307

**\*\*\* Please be reminded that all claims correspondence to be send to [claims@transcab.com.sg](mailto:claims@transcab.com.sg)**



**TRANS-CAB SERVICES PTE LTD**  
No. 2 Ang Mo Kio Street 63, Singapore 569111  
Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764  
Website: [www.transcab.com.sg](http://www.transcab.com.sg)

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**From:** Ng Wai Yin [mailto:waiyin.ng@transcab.com.sg]  
**Sent:** Thursday, 11 October, 2018 11:31 AM  
**To:** 'Denise Tay (LKKAUTO)' <denisetay@lkkauto.com>  
**Subject:** FW: III Ref:MCP121819/01/sn; ; OUR REF : AAD1309-131 (SHD 9370G) - DOA 10.9.2013; Accdt invg SHB8915C(III) & SHD9370G on 10.9.13

Hi Denise

Any updates on the survey report?

Thank You  
Best Regards,  
**Ng Wai Yin**  
Finance Department  
TEL: 6603 1265 Ext.308

**\*\*\* Please be reminded that all claims correspondence to be send to [claims@transcab.com.sg](mailto:claims@transcab.com.sg)**

## Denise Tay (LKKAuto)

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**From:** calvin.er <calvin.er@transcab.com.sg>  
**Sent:** Wednesday, 5 December 2018 11:49 AM  
**To:** Denise Tay (LKKAuto)  
**Cc:** 'Ng Wai Yin'  
**Subject:** RE: III Ref:MCP121819/01/sn; ; OUR REF : AAD1309-131 (SHD 9370G) - DOA 10.9.2013; Accdt invg SHB8915C(III) & SHD9370G on 10.9.13

Dear Denise

The vehicle was registered on 19/1/2012

Kenneth surveyed the vehicle on 12.09.13 @ 1130hrs

Thank You  
Best Regards,  
Calvin Er  
Finance Department  
TEL: 6603 1265 Ext.307

**\*\*\* Please be reminded that all claims correspondence to be send to [claims@transcab.com.sg](mailto:claims@transcab.com.sg)**



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**From:** Denise Tay (LKKAuto) [mailto:[denisetay@lkkauto.com](mailto:denisetay@lkkauto.com)]  
**Sent:** Wednesday, 5 December, 2018 11:28 AM  
**To:** calvin.er <calvin.er@transcab.com.sg>  
**Cc:** 'Ng Wai Yin' <[waiyin.ng@transcab.com.sg](mailto:waiyin.ng@transcab.com.sg)>  
**Subject:** RE: III Ref:MCP121819/01/sn; ; OUR REF : AAD1309-131 (SHD 9370G) - DOA 10.9.2013; Accdt invg SHB8915C(III) & SHD9370G on 10.9.13

Dear Calvin,

Please provide the vehicle DD-MM-YY of registration and survey date by kenneth

Best Regards,

Denise Tay | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: [denisetay@lkkauto.com](mailto:denisetay@lkkauto.com) | fax: 6256-4315

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

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

### ACCIDENT STATEMENT

Date Of Report	11/09/2013 15:24
Date Of Accident	10/09/2013 23:00
Exact Location Of Accident	Services Road towards PIE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD9370G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878k

### Vehicle Particulars

Manufacturer	CHEVROLET
Model	EPICA-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	Hire and reward
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	Taxi

### Insurance Company

Name of Insurance Company	First Capital Insurance Ltd
Type Of Coverage	Third Party
Fleet Policy	Yes
Policy Number	D-12047359MFSH
Cover Note Number	

### Driver

Name of Driver	KOH HOCK SENG @TAY HOCK SENG
NRIC No	S0075829I
Date Of Birth	13/10/1949
Occupation	Outdoor
Date Of Driving Pass	18/07/1967
Driving Experience	46 Years And 1 Month
Gender	Male
Mobile Number	(Local) +65-82070340
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 814 Tampines Street 81 #11-570
Postcode	520814
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Other - Hirer

Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	Collision- Head to Rear (TP Hit Insured)
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No

#### 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

On 10.09.2013 at about 2300hrs, I was turning right from Serangoon Road towards PIE direction. When I was traveling straight at the services road towards PIE, a pick-up in front of me stopped and I followed suit. Suddenly I felt an impact from behind and realized that vehicle B (SHB8915C) failed to stop and collided into my taxi's rear portion. SHD9370G : 1 passenger onboard. SHB8915C : with passengers onboard.

Are accident photos available for attachment?	Yes
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#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB8915C
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	YONG WEE LEK
NRIC/Passport Number	
Contact Number	8280 6315
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

### SKETCH PLAN

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 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.

Woodsville Flyover

towards PIE

Pick-up

SHD9370G

SHB8915C

Services Road

Refer to GZA report

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

Witnessed by Reporting Centre  
Personnel

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



**TRANS-CAB AUTO SERVICES PTE LTD**  
 NO.42 SUNGEI KADUT ST 1 SINGAPORE 729346  
 TEL NO.6287 6666 FAX NO.6366 8862  
 CO/GST REG NO.201019626G  
 SHD 9370G - III

*Not Authorised*  
*LI Sup & 2000p*  
**LI DAN**

Vehicle No.:	<b>SHD 9370G - LI DAN</b>
Chassis No.:	<b>LK1LA69RJBB075512*</b>
Vehicle Make:	<b>CHEVROLET</b>
Vehicle Model:	<b>EPICA 2.0</b>
Date of Accident :	<b>10.09.2013</b>
Third Party Insurer :	<b>III</b>

PART		LIST	
1	1	Rear Bumper	\$ Bu 1,202.00 ✓
2	1	Rear Bumper Beam	\$ Bt 239.94 ✓
3	1	Rear Bumper Centre Absorber	\$ CM 260.00 ✓
4	1	Rear Bumper Side Retainer RH	\$ DY 68.76 ✓
5	1	Rear Bumper Side Retainer LH	\$ Sn 68.76 X
6	1	Rear Bumper Reflectors LH	\$ Sn 119.74 X
7	1	Rear Bumper Reflectors RH	\$ CM 119.74 ✓
8	1	Rear End Panel Inner	\$ R 336.84 X
9	1	Rear End Panel Outer	\$ R 623.76 X
10	1	Rear End Panel Inner Trim	\$ Sn 263.84 X
		\$	<b>3,303.38</b>
		10% \$	<b>330.34</b>
		Total \$	<b>2,973.04</b>

### Special Nett

1 Set	Rear Bumper Parking Sensor	\$	Net 300.00 ✓
1 Set	Rear Bumper Fastener Clip	\$	Net 30.00 ✓

**TOTAL \$ 330.00**

**TOTAL PARTS \$ 3,303.04**

Panel Beating, Knocking And Straightening The  
 Necessary Portion, Remove And Renewal Of  
 Parts, Adjust And Realign The Same

\$ 840.00 *2000*

**TRANS-CAB AUTO SERVICES PTE LTD**  
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TEL NO.6287 6666 FAX NO.6366 8862  
CO/GST REG NO.201019626G  
SHD 9370G - III

LI DAN

To Rust-Proofing Of The Affected Areas.	\$	~ 380.00 X
To Check Electrical Lighting Concerned.	\$	170.00 201
Putty And Spray Painting Of The Affected Portion.	\$	810.00 2001
To Reinstall Rear Bumper Parking Sensor.	\$	170.00 601

TOTAL \$ 2,370.00

Over All Total \$ 5,673.04

REPAIR DAYS

3 DAYS  
2 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

Affiliated to Federation Internationale Des Experts En Automobile				
TRANS-CAB AUTO SERVICES PTE LTD		Ref : CS/TP18021958/Ktbe2		
NO.2 ANG MO KIO STREET 63SINGAPORE 569111		Date : 26-12-2018		
		Code : TP378		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	Veh. Inspected		SHD 9370G	
Policy No.	Coverage (\$)		0.00	
Claim No.	Excess (\$)		0.00	
Assign From	Assign Date		12/09/2013	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	CHEVROLET EPICA (A)	c.c	1991	
Engine No.	HIDDEN	Year of Reg.	2012	
Chassis No.	KL1LA69RJBB075512	Colour	WHITE / RED	
Odometer	281309	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	FALKEN	6 mm	
L/H Front Tyre	195/65 R15	FALKEN	6 mm	
R/H Rear Tyre	195/65 R15	FALKEN	6 mm	
L/H Rear Tyre	195/65 R15	FALKEN	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.				
DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	10/09/2013	Inspection Date	12/09/2013	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO. 42 SUNGEI KADUT ST 1 SINGAPORE 729346			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		<b>2 Working Days</b>		



# 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. SHD 9370G

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR BUMPER	BUCKLED	1,202.00	1,202.00
1	REAR BUMPER BEAM	BENT	239.94	239.94
1	REAR BUMPER CENTRE ABSORBER	CRACKED	260.00	260.00
1	REAR BUMPER SIDE RETAINER RH	DISTORTED	68.76	68.76
1	REAR BUMPER SIDE RETAINER LH	SERVICEABLE	68.76	-
1	REAR BUMPER REFLECTORS LH	SERVICEABLE	119.74	-
1	REAR BUMPER REFLECTORS RH	CRACKED	119.74	119.74
1	REAR END PANEL INNER	TO REPAIR SEE LABOUR	336.84	-
1	REAR END PANEL OUTER	TO REPAIR SEE LABOUR	623.76	-
1	REAR END PANEL INNER TRIM	SERVICEABLE	263.84	-
	LESS 10% DISCOUNT		-330.34	-189.04
			2,973.04	1,701.40
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	SET REAR BUMPER PARKING SENSOR (SN)	DENTED	300.00	300.00
1	SET REAR BUMPER FASTENER CLIP (SN)	NECESSARY	30.00	30.00
			330.00	330.00
	<b><u>LABOUR</u></b>			
	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF REAR END PANEL INNER AND REAR END PANEL OUTER.		840.00	200.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.	NOT NECESSARY	380.00	-
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		810.00	200.00
	TO REINSTALL REAR BUMPER PARKING SENSOR.		170.00	60.00
			-	-
			-	-
			2,370.00	480.00
	<b>GRAND TOTAL</b>		<b>5,673.04</b>	<b>2,511.40</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>			<b>2,000.00</b>

Report Ref No. CS/TP18021958/Ktbe2





Report Ref No. CS/TP18021958/Ktbe2

**KONG SENG CHEONG**

**Licensed Appraiser**

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