ASS, REC, BY:	The state of the s	
Surveyor :	ASSIGNMENT (Office)	
From (Person)	i): Amsley wong of GMI Date/Time: 1012018 301	PM
Estimated Cos	st: Bill to:	1
OD TO W	STTP RES / OD RES / EVA / INV / MV / CS	
	ehicle No: SLE 18957 Insured: Public Linkility	
at Workshop	m/s Gon Lee Muy Automobile Tel: 9145 4773	\ī
of	181k 5033 AMK Ind Park 2 #01-295	
Policy No:	Claim No: CLGLLPLU00000341	
Sum Insured:		
Make of Veh: (Client's Record	POA OHIONE	
CA / REV	/ REP. / REV 24 HRS 'WP' H.O.D. Endorsement:	
	Person Contacted: Alfred Vehicle_IN/OUT	
Date/Time	Action/Instruction ( ) Estimate	
	SIE 18853 - X	*
	Public Liability -x	
13/12/18	16:49 p.m. revised pA to Annsley via an	مم
-		

ASSIGNMENT

	Veh Ho SLE 1895 J Yr Regn July 2016
From Date:	Type M.Can M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	M - 1 ( 1000
To Inspect Vehicle No:	21
at Workshop m/s	(2010)
of	The state of the s
Insured 1	Eng/No: PE >0790538
Policy No	5MCGJ1072G0240694
Claims No.	Gen. Cond. Good / Fair / Poor / Burnt
Sum Insured Excess:	Steering: Inoffder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inforder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size F: 225   55 7.17
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO OF Solvana
Bal. or Market Value.	R/Bal. & nim R/Bal. & mm
IDAC Accident Rport: Consistent? : Yes or No	· · · · · · · · · · · · · · · ·
GIA / PR Seen: Consistent? : Yes or No	D.O.A. 0111/2018 D.O.I. 07/12/2018
Est Repairs: 2 days Res.: Yes or No	01. 21-11
Lum Sum: ?\? % 3 Val.: Yes or No	
CA / REV / REP. / 24 HRS	Des, of Damages ; Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction  Grent American  Public hebility  6804 7850 - Ann Sley	•
12/02/19 Jungpur 7/7 1364.96 RECEIVED 1 4 FEB 2019 (F	Red, \$ 1479.04, 520/0)
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 2
: Final Report	Resurvey No. of Trip:   Survey Fee:
Date/Time, File Return to/	Transportation:
14/2- typist Add Fee	- Table
	Interview (\$ ) Photos
Report Format :	Tech Invs (\$ ) ones
Lump Sum / I.B.I: (1) 1364,96 2	Weekend is
	TOTAL

## Shirley Hiew (LKK Auto)

From:

Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>

Sent:

Thursday, 13 December 2018 4:49 PM

To:

'Wong, Annsley'

Cc:

'Puan, Mui Hong'; SUR; Admin-D (LKKAuto); assignments

Subject:

RE: New assignment- GAI Ref: CLGLLPL000000341- Public liability claim against B-

Team Construction Supplies Pte Ltd- Damage to SLE 1895J

Attachments:

SLE 1895J - Preli Advise -.pdf

Dear Annsley,

Enclosed preliminary revised of vehicle SLE 1895J.

Thank you.

Best Regards,

Shirley Hiew | Case Handler

#### LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>Sur@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) [mailto:admin-d@lkkauto.com]

Sent: Monday, 10 December 2018 3:04 PM

To: 'Wong, Annsley' <Annsley.Wong@sg.gaig.com>; assignments <assignments@lkkauto.com>

Cc: 'Puan, Mui Hong' <MuiHong.Puan@sg.gaig.com>; SUR <sur@lkkauto.com>

Subject: RE: New assignment- GAI Ref: CLGLLPL000000341- Public liability claim against B-Team Construction

Supplies Pte Ltd- Damage to SLE 1895J

Dear Annsley,

Thank you for the assignment.

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: Wong, Annsley [mailto:Annsley.Wong@sg.gaig.com]

Sent: Monday, 10 December, 2018 3:01 PM

To: assignments@lkkauto.com

Cc: Puan, Mui Hong < MuiHong.Puan@sg.gaig.com >

Subject: FW: New assignment- GAI Ref: CLGLLPL000000341- Public liability claim against B-Team Construction

Supplies Pte Ltd- Damage to SLE 1895J

Importance: Low

Dear Catherine

## Catherine Chong (LKK Auto)

From:

Wong, Annsley <Annsley.Wong@sg.gaig.com>

Sent:

Monday, 10 December, 2018 3:01 PM

To:

assignments@lkkauto.com

Cc:

Puan, Mui Hong

Subject:

FW: New assignment- GAI Ref: CLGLLPL000000341- Public liability claim against B-

Team Construction Supplies Pte Ltd- Damage to SLE 1895J

Importance:

Low

Dear Catherine

Resending as requested. Please confirm receipt. Thank you.

Yours faithfully

Annsley Wong, Assistant Manager, Marine Claims | P. + 65 6804 7850 | F. +65 6235 3354 | Annsley.Wong@sg.gaig.com



Claims | 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190

This email transmission, including any attachments, is intended solely for the addressee named above, and may contain confidential or privileged information. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender immediately by reply email and destroy the message and its attachments.





Moody's A1 (Good) Published December 2017 Standard & Poor's A+ (Strong) Affirmed February 23, 2018

For more information on our financial ratings, visit GAIG.com/FinancialStrength.

From: Wong, Annsley

Sent: 7 December, 2018 11:47 AM

To: 'assignments@lkkauto.com' <assignments@lkkauto.com>

Cc: Puan, Mui Hong < MuiHong. Puan@sg.gaig.com>

Subject: New assignment- GAI Ref: CLGLLPL000000341- Public liability claim against B-Team Construction Supplies

Pte Ltd- Damage to SLE 1895J

Importance: Low

assignments@lkkauto.com

Catherine

Dear Catherine

- 1. We refer to the above matter and the telecon this morning.
- We are the public liability insurers for B-Team Construction Supplies Pte Ltd. The owner of vehicle SLE 1895
   J has lodged a claim against our Insured for property damage and she is now represented by Kuru & Co.
- As spoken, parties have agree to appoint your company as the Single Joint Expert in the above matter.
   Please confirm your acceptance of this appointment by way of a return email.
- The motor vehicle is available for inspection at:

GOH LEE HWA AUTOMOBILE PTE LTD Blk 5033 Ang Mo Kio Ind Pk 2 #01-255 Singapore 569536408700 Contact: 9145 4773/Alfred

- Please conduct a pre-repair survey within the next 2 working days. Please also investigate the cause of the damage and let us have your comments on our Insured's liability.
- 6. We attach the following documents which we received for your consideration:
  - a. Police report by Third Party's spouse
  - b. GIA statement
  - c. Quotation
  - d. Photographs of the vehicle
  - e. Letter from Goh Lee Hwa Automobile Pte Ltd (we did not receive the original by fax or post)
- 7. Please acknowledge receipt of this email and we look forward to your prompt reply.

Yours faithfully

Annsley Wong, Assistant Manager, Marine Claims | P. + 65 6804 7850 | F. +65 6235 3354 | Annsley.Wong@sg.gaig.com



Claims | 3 Temasek Avenue #16-01 Centennial Tower Singapore 039190

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Moody's A1 (Good) Published December 2017

Standard & Poor's A+ (Strong) Affirmed February 23, 2018

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

Your Ref: CLGLLPL000000341

Date: 13 December 2018

Our Ref: CS/GAI18022145/Dsb

The Motor Claims Department
GREAT AMERICAN INSURANCE COMPANY

Dear Sir/Madam,

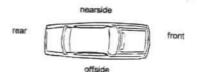
## INITIAL INSPECTION REPORT OF VEHICLE NO. SLE 1895J .

Please be informed that we had conducted the inspection of the abovementioned vehicle on <u>07/12/2018</u> at the premises of M/s <u>Goh Lee Hwa Automobile Pte Ltd</u> and have the following to report:-

Workshop Estimate Amount	: <u>S</u> \$	2,844.00	
Revised Estimate Amount	: <u>S</u> \$	1,364.96	- 1
"Check" Items Amount	: <u>S</u> \$		
Market Value	: <u>S</u> \$		- 1
LTA Reimbursement Value	: <u>S</u> \$		
Nett Value	: S\$		

#### Description of Damage:

The vehicle sustained damages at the rear portion .



#### Comments/ Present Status:

Damages Consistent. Repair days: 2 Days

Yours faithfully, Bryan Ang Automotive Assessor

## KURU & CO

# PRE REPAIR INSPECTION (PRI) MEMO 1

Studing Saturday, Sunday and from Third Party insurer. Ple	Public Holiday)  ease proceed to appoint your sur	
eluding Saturday, Sunday and from Third Party insurer. Placetime of the Party insurer.	Public Holiday)  ease proceed to appoint your sur	② No. D( AM / PM. Time frame −2  veyor and repair the vehicle.
eived the Third Party insurer	. 1	veyor and repair the vehicle.
eived the Third Party insurer nolosed.	o DEDI V mish thesis line of our	
nclosed.	S NET L I WHEN THEIR HIST OF SUFV	eyors on 7/12/18 @10:37
on AGREE, please indicate		
LICIC ANTO	- AS INSTRUCTED	
		19 19
eir surveyor has to NOTIFY	YOU IN WEITING to state that This letter also support your claim	in for loss of use/rental)
ase forward us the repair bi	ill and supporting documents v	when it's ready for us to proceed with y
		NC all alates
anwhile, please let us the foll	owing information that is require	ed for the claim:
PRI (Before dismantle)	Date: 412118	Time: 12.45 fum
PRI (Dismantle)	Date:	
Post repair inspection (if any)	Date:	
Surveyor	Cot	Name:
Agreed COR / Days for repair	S	Days:
Vehicle	Date in:	Date out:
heir surveyor is asking for I	Direct Settlement, our legal fee	s at this stage is \$321.00 plus disbursen
urred.		
urred.	eve your list of 10 surveyor com	pany, surveyor name and contact number
urred. ou <u>OBJECT</u> , please let us ha		pany, surveyor name and contact number
	eir surveyor has to NOTIFY beeed to repair the vehicle. (sase forward us the repair bitm.  anwhile, please let us the following properties of the properties	Post repair inspection (if any)  Surveyor Co!  Agreed COR / Days for repair

#### 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 witholding 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

THE TOTAL PROPERTY OF STREET	ACCIDENT OF LEGISLE
	ACCIDENT STATEMENT
Date Of Report	07/11/2018 11:05
Date Of Accident	01/11/2018 12:00
Exact Location Of Accident	SERANGOON NORTH AVE 2.BLK151 CARPARK LOT NO.46
Country/State of Loss	SINGAPORE
The second se	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLE1895J
Insured/Policyholder	
Name Of Registered Owner	LOH SOON MUI
NRIC No	S1579370H
Email Address	STARAUTO28@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97869100
Alternative Phone No	OFFICE-97889100
Vehicle Particulars	
Manufacturer	MAZDA
Model	6-2.0 4-DOOR SEDAN (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA222146/1
Cover Note Number	

## Driver

Name of Driver KUAH SIONG LOON NRIC No S1326408B Date Of Birth 07/06/1958

Occupation INDOOR Date Of Driving Pass 12/09/1975

**Driving Experience** 43 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97889100

Fax Number Contact Number

EMail Address NOEMAIL Address

BLK 513 YIO CHU KANG RD #02-31

Postcode

787067

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

HOGANG N.P.C

Police Station Address

ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775, POSTCODE: 538775,

**COUNTRY: SINGAPORE** 

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

**Circumstances of Accident** 

REFER TO POLICE REPORT 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

:

#### Sketch Plan Pg. 1

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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 ("GLA") 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:
  - 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:
  - 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

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

NRIC/FIN No .:

## Sketch Plan Pg. 2

BETCH PLAN	# 151 Co	ger Gertec	Coffee		··/1 <del></del>
=					<del></del>
		- 45   - 46			
	8 131 JB	erongoon Horti	AUD 3	2 Favro	
	ANCES OF THE ACCIDE				
INS 184	2 ATTAUL (	01100 000	027		
					·*O
					<u> </u>
	8				
			180		
				0	
CLARATION e declare the foregoin	g particulars are true in eve	ery respect.		(h.	1/11/18
D		XGD/		65 <b>7</b> 55 ( <b>N</b> )	,
cyholder's Signature	Driver's Signa	ature of the policyholder)	Repo	rting Centre Personn	el's Signature

Date & Time:

NRIC/FIN No.:





81102/2056

Report No. F/20181102/2056

#### POLICE REPORT (NP299)

Police Station Of Origin Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

Date/Time Report Made 02/11/2018 11:18	Vide Re	port No.		Station Diary No. 16
Name Of Informant	Address			2
KUAH SIONG LOON	513 YIO	CHU KAN	G ROAD #02-31 S	SINGAPORE 787067
ID Type / ID No. NRIC NO / S1326408B	Contact Home/C		Mobile 97889100	
Nationality SINGAPORE CITIZEN	Email A	ddress		
Occupation	Sex	Age	Date of Birth	Race
SELF-EMPLOYED	Male	60	07/06/1958	Chinese
Institution/School Name	Language			
Date/Time Of Incident 01/11/2018 12:00	Location Of Incident 151 SERANGOON NORTH AVENUE 2 HDB- SERANGOON NORTH ESTATE SINGAPORE 550151 151 Coffee & Tea Lot number: 46			

#### Brief details.

On 01/11/2018 at about 0845hrs, I have just parked my vehicle (SLE1895J) at the lot number 46 behind of this 151 Coffee & Tea Coffeeshop as my workplace is located there. Everything was still intact and there no was construction nearby.

Later on at about 1200hrs, I was about to place my grocery into my vehicle when I noticed that the area just behind my vehicle was cordon of with a red/white tape as there was some ongoing construction. I

Signature Of Officer Recording The Report: F / Sgt 2 KOH YEW WEI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 02/11/2018 11:18
Officer In-Charge Of Case: F / Hougang N.P.C / SI MUHAMMAD HELMI BIN MOHD KHALID Contact No.: 64890999	Classification Of Case:

Authentication Stamp

7





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20181102/2056

noticed that the rear of my bumper have stain of cement on it. I quickly informed the nearby worker about it and they offered to clean the stain of. However, they were cleaning it off with the use of water and their cotton gloves only.

Few minutes later, after the water on my rear bumper have dried off I noticed that there were now scratches at the same spot which I believed was caused by the use of their cotton gloves. I informed the workers again about it. They gave me their supervisor's name and contact number, Mr. Koh HP: 81330780 and he acknowledged to the damage and advised me to lodge a report with my insurance.

As such, after informing my insurance about this matter they advised me to lodge a police report for my own record purpose so that my insurance company can take the needed action.

Details of the construction company as follow: B-Team Construction Supplies Pte. Ltd. 4003 Depot Lane #01-61 S(109757)

Authentication Stamp

Date/Time: 02/11/2018 11:18	
Classification Of Case:	
	02/11/2018 11:18

4

#### GOH LEE HWA AUTOMOBILE PTE LTD

Co. Reg No. 200808259H

Block 5033, Ang Mo Kio Industrial Park 2

#01-255 Singapore 569536

Tel: (65) 6482 1009 Fax: (65) 6482 4452

Date: 27/11/2018

M/s. GREAT AMERICAN INSURANCE COMPANY

SINGAPORE Tel: 6235 3354 Fax: 6804 7847

Email: muihong.puan@sg.gaig.com

Attn: Puan Mui Hong (Ms)

Dept: The Motor Claims Department

#### Estimate Repair Cost For Regn No: SLE 1895 J

S/No.	Description	UOM	Unit	Total (S\$)	]
				1206.20	
01.	Rear Bumper Assy 15th Ask	рс	1.00	1,800.00	_
02.	Rear Bumper Retainer	pc	2.00	194.00	×
03.	To spray painting Bumper	lot	1.00	400.00	-1006
04.	Labour charge to remove and refit Bumper	lot	1.00	450.00	1001-
			Total: SGD	2,844.00	

Singapore Dollars: Two Thousand Eight Hundred and Forty Four Only. Perts 1206.20 207, 964.96 GOH LEE HWA AUTOMOBILE PTE LTD 07/12/2018 @ 1300ms LKK Auto Consultants hence notify

# the Remainer 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:

Check port prices.



## 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				
GREAT AMERICAN INSURANCE COMPANY	Ref :	CS/GAI18022145	5/Dsbe2	
3 TEMASEK AVENUE		44.00.0040		

#16-0	MASEK AVENUE 01 CENTENNIAL 04 APORE 039190	TOWER	Date: 14-02-2019		
			Code: GAI		
1.		Policy Particula	ars :- THIRD PARTY CLA	IM	
	Insured Veh.	PUBLIC LIABILITY	Veh. Inspected	SLE 1895J	
	Policy No.		Coverage (\$)	0.00	
	Claim No.	CLGLLPL000000341	Excess (\$)	0.00	
	Assign From	ANNSLEY WONG	Assign Date	07/12/2018	
		Vehicle Pa	articulars & Condition		
	Make & Model	MAZDA 6	c.c	1998	
	Engine No.	HIDDEN	Year of Reg.	2016	
	Chassis No.	JM6GJ1072G0240694	Colour	BLACK	
	Odometer	88680	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	SPORTS RIM	
	General	GOOD			
		Con	ditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	225/55 R17	YOKOHAMA	8 mm	
	L/H Front Tyre	225/55 R17	YOKOHAMA	8 mm	
	R/H Rear Tyre	225/55 R17	YOKOHAMA	8 mm	
	L/H Rear Tyre	225/55 R17	YOKOHAMA	8 mm	
		Descr	iption of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE	REAR PORTION.		
	DAMAGES SEE D	ETAILS.			
i		Gen	eral Information		
	Accident Date	01/11/2018	Inspection Date	07/12/2018	
	Survey held at	GOH LEE HWA AUTOMOBI	LE		
		BLK 5033, #01-255 AVENUE 3 ANG MO KIO IN SINGAPORE 569536	D. PARK 2		
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				

2 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



### 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

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#### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLE 1895J

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER ASSY	DISTORTED	1,800.00	1,206.20
2	REAR BUMPER RETAINER	NOT NECESSARY	194.00	-
	LESS 20% DISCOUNT		32	-241.24
			1,994.00	964.96
	LABOUR			
	TO SPRAY PAINTING BUMPER.		400.00	200.00
	LABOUR CHARGE TO REMOVE AND REFIT BUMPER.		450.00	200.00
			850.00	400.00
	GRAND TOTAL		2,844.00	1,364.96

RECOMMENDED COST OF REPAIRS	1,364.96

Report Ref No. CS/GAI18022145/Dsbe2

ANG BRYAN TANI

Automotive Assessor / Investigator

XX.X.

ADRIAN LING WAI PING

B.Eng, AMSOE, AMIRTE, AMSAE-A, M. MATAI

Licensed Appraiser

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