Milmon From (Person): Mund	Ashik of	NMENT (Office) MSIG	Date/Fim	12/12/180
Estimated Cost:	1 Mank of	Bill to:	Data I III	
^	S/OD RES/EVA/INV/N		•	
To Inspect Vehicle No:			Insured: S	KW 6369
	HKL HIM		Tel: (1)24	
ofE	31k 1008, BK+ MOR	in Jone 3 # 0	01-24	
	444387A72)
Sum Insured:	-(-(-124) // /=	Excess:		
Make of Veh:			D.O.A.	23/11/1201
(Client's Record) CA / REV / REP. /	REV 24 HRS WP			1602-30pm-
	Person Conts	acted. Jumes	Vehicle II	
Date/Time Action/	Instruction () Esti	mate		
	3867G-NBA/INCL		Arm	: 23/11/201
		NC180213881Y		1:23/11/20
	00200 X-1401/1	(XL)		

Shermer taught	REF: MS16		
Birright Taught	A5516	SIMENT	
	22-30	Veh No. F& 38876.	VI Page July 1985
From.	Date:	Type: M.Car / M.Cygle / Bus / Van / Lorr	v / Taxi / Prime Moyer /
Estimated Cost		Truck / Trailer or	•
OD TP WS ITP RES I OD RES I E	EVA / INV / MV		200
To inspect Vehicle No.		Make: Verpa 1x20.	AIC: Insured / Std / NI / NA
at Workshop m/s		Sp Reading 336/	T/Radio: Insured / Std / NI / NA
la		ASSESSMENT STATES OF THE PARTY	Thradic made of the
Insured:		Eng/No: VS XIT(74 27 2
Policy No.			7.
Claims No.		Gen. Cond/Good / Fair / Poor / Burnt	- N
Sum Insured:	Excess:	Steering: Inorder / Jammed / Leaked / E	
(Client's Record)		Brake: Inorder / Jammed / Leaked / I	Burnt or
Make of Veh:		Modi: (Nil) / S/Rim / STD A/Rim or	
		Tyre Size. F: 3.50 -	(0
(Policy Condition)		R:	7
Remark: The veh had commenced		BS / DUN / EXNOVA / GY / FS / LIZA	MIC / OHTSU / PIR / SUMI /
repair at the time of insp		TOYO / YOKO or	
Bal. or Market Value:	5000	Front	Rear
IDAC Accident Rport. C	Consistent? : Yes or No	R/Bal. 5 mm	R/Bal.) mm
GIA / PR Seen: C	Consistent?: Yes or No	L/Bal mm	L/Bal mm
Est. Repairs: days	Res.: Yes or No	D.O.A.	8/12/18
Lum Sum: %	3 Val: Yes or No 2-30-359pm	Survey held at UKL	Lim Rm!
CA / REV / REP. / 24 HRS		Des. of Damages : Frt / Rear / 0/s	N/S / U/C / Rooftop or
	Vehicle: IN / OUT		Characters offseted due to collicion
Date: Person Con		The U/C / Chassis frame / Body	Structure anecied due to comision.
Date / Time Action / Instruction	fikh,	•	
(0.0	Kam Now W	the net value	2
	144. 1. 400	, , , , , , , , , , , , , , , , , , , ,	1
	- RECEIVED	2 G IAN 2019	media
	110011100	L J JAN LOV	1 (/
			21/12
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		1	
Date/Time: File Pass to?	reli. Report	Days Of Repair:	
1) : F	inal Report	Resurvey No. of Trip:	Survey Fee
Date/Time, File Return to?			Transportation 150
a 29/1-typist	Add Fe	Returned .	_1_8+R5_8
	20	Interview (\$) Photos
Report Format :		Tech Invs (\$) (their
Lump Sum / I.B.I: (\$		Weekend (\$	TOTAL 160
			TOTAL 160

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:

Attn:

MSIG Insurance (Singapore) Pte. Ltd.

4 Shenton Way #21-01 SGX Centre 2 Singapore 068807

From: LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933

Muhd Ashik B Madi

Date: 21 Dec 2018

Preliminary Advice

Insured Vehicle No : SKW6369X

TP Vehicle No

: FB3887G

Accident Date

:S\$

: 23/11/2018

Make

: VESPA PX20

Assignment Date

: 12/12/2018

Date of Inspection : 17/12/2018

Est. Duration of Repair

: 6.00

Inspection At

: HKL LIM TEAM MOTORSPORT (HQ)

BLK 1008 #01-24 BUKIT MERAH LANE 3

SINGAPORE 159722

Point of Impact / General Description of Damages

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

Repairer's Estimate (Gross)	:S\$	2,680.00
Revised Amount	:S\$	1,330.00
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,330.00

Lump Sum Repair

Total Loss Consideration

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

Remarks

(1	The vehicle	is	economical/not	economical	for	repair.
---	---	-------------	----	----------------	------------	-----	---------

(X) The above survey was conducted on a 'without prejudice' basis.

...CLAIM SUBFOLDER...(New Assignment)

35G	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
1ain	26 Nov 2018		12 Dec 2018 13:29				New Assignment
			Assign				Cancer case

Ма	in	Reference	1	Claim Details	Ш	Documents			show All
CLAIM SUBF	OLDER DETA	ILS			[Created I	by insurer]			
Insured:	TAN SOON T	HIAM, ID: S0226273H							
Main Claimant:	Nur Farahan	ah Binte Noh, ID: S8	504844I						
Vehicle Reg. No.:	FB3887G			Date of Loss:		3 09:00 - :59 ns and 14 Days F	rom LTA	Reg Date	(Man Yr)]
Claim Type:	TP / 57687	5		Policy/Cover Note No.;		AT2 (Comprehen 09/11/2018 - 08/			
Vehicle Reg. No. (Insured):	SKW6369X			Policy No. (Claimant):					
				Excess:	S\$600.00				
Repairer:		n Motorsport (HQ) BLI 756566/62727292	K 1008 #01-24	4 BUKIT MERAH LANE	3, 159722 B	Bukit Merah - Tel:			
Handling Insurer:	MSIG Insura	nce (Singapore) Pte.	Ltd. (HQ) - Te	el: +65 6827 7888	[Handled by	Muhd Ashik B I	Madi - 6	594 2548]	
Adjuster:	LKK Auto Co	nsultants Pte Ltd (HQ) - Tel: 6256-3	3561 [Imm.Adv	ice due 13	/12/2018]			
Driver/Custo dian (Insured):	LOW MIAU CH	IOW (), NRIC: S12574	39H, Tel: +6	5592731770					- 72
Adj Asg. Remarks:	Liability 50%,	SJE agree - Kenneth Ko	ing from LKK,	Contact : James at 92	42 3895				
ASSOCIATE	MAIL RECE	IVED				V	iew All	Compose	Case Mai
There are no	mail for this cas	se.							
ALL ASSOC	IATED TASKS	e			View All	Search Tasks	Create N	ew Task	Complete
Due Date No results.	Priority	Type Task Group	Subject	Handler Assign	red By	Completed On	Cre	ated On	Done

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	NDIC
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	48441
Vehicle No.:	FB3887G
Vehicle to be Exported:	No .
Intended Deregistration Date:	21 Dec 2018
Vehicle Make:	VESPA
Vehicle Model:	PX20
Primary Colour:	Blue
Manufacturing Year:	1983
Engine No.:	VSE1M0198820
Chassis No.:	VSX1T174223
Maximum Power Output:	
Open Market Value:	\$0.00
Original Registration Date:	09 Jul 1983
First Registration Date:	09 Jul 1983
Transfer Count:	7
Actual ARF Paid: Intended PARF Rebate Details	\$0.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	•
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	31 Aug 2022
COE Category:	D - Motorcycle
COE Period(Years):	10
PQP Paid:	\$1,859.00
COE Rebate Amount:	\$686.00
Total Rebate Amount: Message	\$686.00

Please note that the National Environment Agency (NEA) is offering an incentive for the owner of this motorcycle to deregister the motorcycle on or before 5 April 2023.

This motorcycle is currently eligible for an incentive of \$3,500 from NEA. If the COE is renewed from now till its deregistration on or before 5 April 2023, the incentive will be reduced to \$2,000. The last registered owner of this motorcycle will receive the incentive from NEA.

This motorcycle will no longer be allowed for use on Singapore's roads after 30 June 2028.

For more information, please visit http://www.nea.gov.sg/mtcincentive or contact NEA at 1800-2255-632.

The information contained herein is correct as at 21 Dec 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or 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

STATE OF THE PARTY	ACCIDENT STATEMENT
Date Of Report	27/11/2018 15:11
Date Of Accident	23/11/2018 09:30
Exact Location Of Accident	ALONG LENG KEE ROAD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FB3887G
Insured/Policyholder	
Name Of Registered Owner	NUR FARAHANAH BINTE NOH
NRIC No	S8504844I
Email Address	FARAHNOH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90020597
Alternative Phone No	OTHERS-90020597
Vehicle Particulars	
Manufacturer	VESPA
Model	PX20-200CC
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING TO WORK
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5087068189-01
Cover Note Number	

Driver

Name of Driver NUR FARAHANAH BINTE NOH

 NRIC No
 \$8504844I

 Date Of Birth
 25/02/1985

 Occupation
 OUTDOOR

 Date Of Driving Pass
 19/01/2015

Driving Experience 3 YEARS AND 10 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-90020597

Fax Number

Contact Number OTHERS-90020597

EMail Address FARAHNOH@GMAIL.COM

BLK 23 JALAN MEMBINA Address

#02-78

163023 Postcode

Was driver an employee of the Insured's Company NO

OWNER 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

SIDE SWIPE Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

2 Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

YES

NO

NO

YES

NO

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

ORCHARD NEIGHBOURHOOD POLICE CENTRE Police Station Name

ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY: Police Station Address

SINGAPORE

TEL NO: 1800-7359999 - FAX NO: 67331934 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181123/2101

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

SKW6369X Vehicle Registration Number

TOYOTA CAMRY Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver LOW MIAU CHOW

S1257439H NRIC/Passport Number 90731770 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

Name

NUR FARAHANAH BINTE NOH

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SLIGHT INJURY

FB3887G

NO

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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)
 - (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
- (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
- 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: 23 /11 /2018

Driver's Signature

(if driver is not the policyholder)

Date & Time:

Accident Sketch Plan

SKETCH PLAN	
TOYOTA /LEXUS EN	Oversoon occupied parking T
no.	ringp /
	4
L.	183ma - S-+
55 Cong Fre Road Towards Queenstown AA	16346 - 123-
Towards Queenstown NA	
	55m 6369x
DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT
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	(In)
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ECLARATION	
We declare the foregoing part	riculars are true in every respect.
1	/ //
1	27/4/2018
licyholder's Signature	Driver's Signature Resorting Centre Personnel's Signature Law
te & Time: 2 x/11/2015	(If driver is not the policyholder) Name Name Name Name





Police Station Of Origin: Orchard N.P.C

51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

Report No. T/20181123/2101

REPORT OF	A TRAFFIC	ACCIDENT		Station Diary No.:		
Date/Time Report Made: 23/11/2018 16:24			Vide Report No.:	95		
Informant	's Particu	lars	9色生型經濟學 医肾上腺性	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
Name of I	nformant	BINTE NOH	Address: APT BLK 23 JALAN MEN	MBINA #02-78 SINGAPORE 163023		
ID Type / ID No.: NRIC NO / \$8504844I			Contact No.: Home/Office:			
Nationality SINGAPO	V.		Email:			
Sex: Age: Date of Birth: Female 33 25/02/1985			Type of Informant: Rider			
Race: Malay			Language: Institution / School Name English			
Occupation	R ADVE	NTURE	Driving Licence Information: Class: 2B,3 Date of Expiry:			

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/11/2018 09:30	Type of Location Straight Road
Location: Along Road 1 LENG KEE RO	DAD		l E	load Speed Limit:
Weather: Sunny		Road Surface: Dry		ORCHO PARAMENTONI
Traffic Flow: Two Way		Traffic Control: Not Controlled	1	raffic Volume: No Traffic
Type of Collis	ion: ing Vehicles - Side	Swipe - Same Direction	1	Anyone conveyed by ambulance: No

The second liverage and the second	hicle Involve	Make	Model	Color	Condition	No of Passenge
Vehicle No.	Motorcycle	VESPA	PX20	White	Seriously	0
FB3887G	Motorcycle	Motoreyere		WALL DOORSE	Damaged	
SKW6369X	Car	TOYOTA	CAMRY 2.5 AUTO	Silver	Slightly Damaged	0

Control of the Contro	hicle Insurance	Lacuranas No	Effective	Expiry Date
Vehicle No.	Insurance Company	Insurance No	CHECTIAG	
	NTUC Income Insurance Co-Operative	5087068189-01	01/04/2018	31/03/2019



T/20181123/2101

1120101123/2101

2 of 4 Report No. T/20181123/2101

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

CONTINUATION OF REPORT

Details of Perso Any Pedestrian Ir	A CHARLEST AND A CHAR					
No. of Pedestrian			Use of Ped	lestrian	Cross	ing: NA
Rider				CATTER OF	33 250	
Name	NUR FARAHANAH BINTE	NOH		ID No.		S8504844I
Related Vehicle	FB3887G (Motorcycle)		Contact No.		90020597	
Hospital/Clinic	THE ICLINIC			Class Drivin Licent Expiry	g ce &	Class: 2B,3 Date of Expiry: NIL
Date Treatment	23/11/2018		Date Disch			
No. of Days gran	ted Medical Leave 06		Degree of	Injury	Slight	1
Driver	Service and the service of the servi	SHEET SHEET	2007000	MESSE.	20.676	Application of the Park of the
Name	LOW MIAU CHOW			ID No		S1257439H
Related Vehicle	SKW6369X (Car)			Conta	ct No.	90731770
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave NIL		Degree of	Injury	NIL	

Brief Details.

On 23/11/2018 between 9.30am to 9.40am, I was riding alone on my motorcycle FB3887G (Vespa / Cream White) travelling along 33 Leng Kee Road towards Queenstown MRT. I wish to state that the road is a two-way road. As I was travelling straight suddenly one of the vehicle (SKW6369X / Toyota Camry / Silver) that was in queue make a left turn to get out from the queue. As the driver doing so, it hit onto my right arm area causing me to miss balance. As such, it causes me to ride up the pavement and eventually stopped.

After I managed to stop my vehicle, I stood still checking on my injury while the said driver came over to me. After which, we exchange contact number initially and the driver left to the Toyota Show Room. Then a passer-by informed me to get the particulars of driver instead. As such, I call the driver and we exchange particular and take photographs of the damages. Due the accident, the bottom right of my vehicle is damage which cause a part of its metal body to be torn apart and the fork cover to vehicle also damage and there is also some stretch mark on the right side cowl of vehicle. As for the other vehicle, there is some scratch mark on the bottom front passenger door.

I then called my NTUC insurance company on the matter who send their Orange Force to my location. When the Orange Force came and record down the incident, I was then advice by the officer to lodge a police report. Upon feeling pain on my arm area, I decided to proceed to the Clinic to seek medical attention located at 18 Jalan Membina #02-07 Singapore 164018 namely The iClinic.





3 of 4

Report No. T/20181123/2101

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

CONTINUATION OF REPORT

After seeking the medical attention, I was given 6 days MCs. I wish to state that there is no police attended to my accident. I am lodging this report for insurance claiming.





4 of 4

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No. 1800-7359999 Report No. T/20181123/2101

CONTINUATION OF REPORT

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-3	K.G				Hen i	٠.

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: E / Sr Staff Sgt SITI AISYAH BINTI NANI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 23/11/2018 16:24
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:
Sr Staff Sgt MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No. 65476204	1: 172
Authentication Stamp NP168	



Blk 1006 #01-24, Bukit Merah Lane 3, Singapore 159722 Tel: 6275 6656, 6275 6566, 62727292 Fax: 6272 9291 Email: support@hkllimmotorsport.com.sg Website: www.hkllimmotorsport.com.sg

FB3887G

1 BODY FRAME ALIGNMENT

2 SPRAY PAINTING

3 BODY FRAME RUBBER LINE SET

4 STARTER PEDAL

5 LABOUR

TOTAL

350 \$700.00 \$950.00 500. \$280.00 cut/180 \$150.00 RY \$600.00 300

\$2,680.00

Tapin 9745749

17/12/18 2345/m

Resum affer repair

sive Milliants.com.

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:

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

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

Singapore 408933

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

VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/MSG18022365/T1VD3N2

Date:

29/01/2019

REFERENCE

Handling Insurer:

MSIG Insurance (Singapore) Pte. Ltd.

Policy No:

A80444387AT2

Claimant Vehicle No:

FB3887G

Insured Vehicle No:

SKW6369X

Date of Loss:

23/11/2018

Nature of Claim:

TP

Claim No: 576875

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

FB3887G

Make & Model:

VESPA PX20, 200cc

09/07/1983 (Man. Year: 1983)

Engine No: Chassis No: Odometer:

VSE1M0198820 VSX1T174223

3361 km

Reg. Date: Colour:

Pearl White

Engine Capacity: Market Value/New Car 200 cc

Price:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Handbrake (Serviceable):

Steering (Serviceable): Yes Engine Modification:

Yes Footbrake (Serviceable): No Pre-accident Condition:

Yes

CONDITION OF TYRES

Front Tyre Size:

3.50-10

Rear Tyre Size:

3.50-10 Michelin 5 mm

Front Left Side:

Michelin 5 mm

Rear Left Side:

Front Right Side:

0 mm

Rear Right Side:

0 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS Parts	Repairer's 430.00 0.00	Adjuster's 180.00 0.00	250.00 0.00	Diff % 58.14
Miscellaneous Items Labour Paintwork Labour	2,250.00 0.00	1,150.00 0.00	1,100.00 0.00	48.89
Towing	0.00	0.00	0.00	50.07
Nett Amount (S\$)	2,680.00	1,330.00	1,350.00	50.37

INSPECTION

Date of Assignment:

12/12/2018

Date Inspected:

17/12/2018 Inspected At:

Hkl Lim Team Motorsport (HQ) BLK 1008 #01-24 BUKIT MERAH LANE

Singapore 159722

Estimated Period of Repair:

6.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

Manager: VERON CHEN

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.

THE VEHICLE HAS NOT SEND IN FOR REPAIR.

(REPAIR COST NOT CONCLUDE)

REPAIR DETAILS

Reference

(Last Synchronised: 29 Jan 2019) Part Source:

VESPA PX20 200cc (Model not available in database) N/A Parts:

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

Print Code: (Unsubmitted, no print-code for FB3887G)

These estimates are valid only if they contain the print code (above) on all estimate pages, running page Validity:

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

		nmende Part No.	Particulars	Condition	Repairer's	Amount
1	1	The state of the s	*BODY FRAME RUBBER LINE SET	Cut Repair	280.00 FS 150.00 FS	*180.00 FS *- FS
2 F=Fr	2 1 *STARTER PEDAL F=Franchise part. S=SpcNett.		Total Parts (S\$)	430.00	180.00	
_			Report was unsubmitted du	ring this print-out.		

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

Re No	COMMENDED LADOUR Particulars	Lab.Type	Repairer's	Amount
Lab	our Items	New	700.00	350.00
1	BODY FRAME ALIGNMENT	New	950.00	500.00
2	SPRAY PAINTING	New	600.00	300.00
3	LABOUR	New		40-00:30:00
		Gross Labour Cost (S\$)	2,250.00	1,150.00
	Repor	t was unsubmitted during this print-out.		

< END OF ESTIMATES >