

INSURANCE
 INS. CASE OWNER: Stacey | CC 4 WSM AXA 1900 0143, 91639 | LKK: IDAC:

Surveyor: XGQ | DOI: ASSIGNMENT 000119 | Date / Time: 26/19
 Registered in Merimen:

Pre-assign / CCU / FTE
 Insured Vehicle No.: SHC 5187B | Claim No.: SAM018P4 / 90851
 Name of Insured: TRANS - 4RB SERVICES DM | Policy No.: UPX / 1680520
 Insured Tel No.: _____ | HP: _____ | Make / Model: RENAULT
 Excess Sec II :SS _____ | D.O.A.: 1/1/19 | Place of Accident: LOWER DELTA RD - TMS
 Is driver the owner? (YES / NO) _____ | Nature of Accident: _____ | SPW/01A
 If NO, Driver Name / Age: FOR THE THING | OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO
 Driver Tel No.: _____ | (V/L: YES / NO) _____ | Insured Liability: % Final ? Yes / No

S9913CD → → → → →
 INSRs: WSP: premium | INSRs: WSP: | INSRs: WSP: | INSRs: WSP:
 Tel: | Tel: | Tel: | Tel:
 Liability: | Liability: | Liability: | Liability:
 RMKS: | RMKS: | RMKS: | RMKS:

Date / Time	STAGE	DATE / PIC
<u>8/1/19</u>	Non-Reporting Itr (1st): Non-Reporting Itr (2nd): Non-Reporting Itr (Final): Notification Itr (if non-pickup): Call OI After call Itr to OI: <u>0102/19 - vic</u>	
<u>01/02/19</u>	Documentation Check List: Handler Typist Notification Itr (if non-pickup) After call Itr to OI: <u>EMAIL</u> Authorization to Act: Release Voucher: Final Repair Bill: Car Rental Invoice: Towing Invoice: LTA / GIA: Medical Bill: PIR: Mandate/Reject Instruction: LOD: Payment Breakdown Form: Post-Repair Photos: Others:	
<u>03/03/19</u>	FILE REVIEWED. OLD RATE ENDED TP. SEND EMAIL TO OI TO NOTIFY TP CLAIM. EMAIL LIABILITY CLEAR FINISHED UPLOAD MANDATE 14 IN OC ORIGINAL TP LOD IN. AXA APPROVED MANDATE SEND ACCEPTANCE EMAIL TO TP. ALL DOCS IN ORDER. TO CLOSE.	
<u>20/05/19</u> <u>04/06/19</u>		

PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____
FINALIZATION	Date/Time: _____	Confirm with: _____ Confirm by: _____
Repair Cost: <u>PIP</u>	\$S <u>4,240.20</u> (3 days) Reduction: <u>36</u>	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: <u>04/06/19</u> Confirm with: <u>MS</u>	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability: % <u>100</u> (Assess / Assessed) BOLA S/N No.: <u>27</u>	If NO or B 28, Ass. Lia: <u>COLD RATE - ENDED TP</u>	
Repair Cost: <u>21/950</u>	\$S <u>4,587.01</u>	COPY SENT <u>6/6/19</u>
Loss of Rental (LOR): \$S _____ (_____ days)		
Loss of Use (LOU): \$S <u>300.00 x 100 x 3</u> days)		
Loss of Income (LOI): \$S _____ (_____ x _____ days)		
LOI only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search \$S <u>7.45</u>		
Medical: \$S _____		1) Claim status: Normal/Reject/Private Settle
Disbursement: \$S _____ (e.g. Tow/Independent)		2) Report Format: _____
Legal Cost \$S _____		3) Survey fee: <u>\$350.00</u>
Total:	\$S <u>4,844.46</u>	Global Sum \$S: _____
FINAL PAYMENT	Date/Time: _____	Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	\$S <u>4,844.46</u>	Name 1: <u>PREMIUM AUTOMOBILES PTE LTD</u>
Payee 2: (Strike if N.A.)	\$S _____	Name 2: _____
Payee 3: (Strike if N.A.)	\$S _____	Name 3: _____

XAL

REF: ASM (AXA)

h

ASSIGNMENT

From: _____ Date: 08DI-2019

Estimated Cost: _____

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

To inspect Vehicle No: S9917CD

at Workshop m/s: Premium

of: 55 Ubi Rd 1

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition) from Owner writing

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

Bal. or Market Value: \$133K

IDAC Accident Rpt: _____ Consistent?: Yes or No

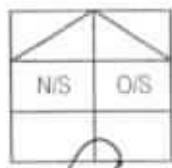
GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 3 days Res: Yes or No

Lum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT



Veh No: S9917CD Yr Regn: 14 Jun 2018

Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Audi A4 cc: 1984

Colour: white A/C: Insured / Std / NI / NA

Sp. Reading: 531 T/Radio: Insured / Std / NI / NA

Eng/No: _____

CfNo: WAUZZZ8F43JA163696

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD / R/Rim or

Tyre Size: F: 205/60R16 .. R: 11

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

Front R/Bal: 9 mm Rear R/Bal: 9 mm

L/Bal: 9 mm L/Bal: 9 mm

D.O.A. _____ D.O.I: 08-d-19

Survey held at: w/s 11AM

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
	p/p at 2.20.20
	CRAB: \$2,407.80 / 30%

Date/Time: File Pass to? : Prel. Report

1) : Final Report

Date/Time: File Return to? _____

2) _____

Report Format: _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

_____ \$ + RS. \$

Photo: _____

Other: _____

TOTAL: _____

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

AXA INSURANCE PTE LTD

Ref : CC4/ASM19000143/hb3

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811

Date : 03-01-2019



Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 5187B	Veh. Inspected	S 9917CD
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	03/01/2019

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

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5. General Information

Accident Date	01/01/2019	Inspection Date	
Survey held at	PREMIUM AUTOMOBILES PTE LTD 55 UBI ROAD 1 . SINGAPORE 408699		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

Telefax

Estimate : Accident Repairs
Workshop : Ubi Road 1
Contact No : 6366 2323
Fax No : 6841 1183
Reference : PA/TP/0008/2019/GW
Date : 3-Jan-19

Vehicle not in workshop. Kindly arrange for survey.

Your insured vehicle no: SHC 5187 B

AXA Insurance Singapore Pte Ltd

8 Shenton Way

#27-01 AXA Tower

Singapore 068811

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax 6880 4838

Owner's Name : Mr. Jun HanSung
Address : 967 Bukit Timah Road
#05-13
Singapore 589663
Telephone : (HP) 84945624
Type of Claim : Third Party Claims
Policy No. : 1800060456
Vehicle No : **S 9917 CD**
Model Code : Audi A4 Sedan 2.0 TFSI
Model / Year : Jun-18
Engine No : CVK 061090
Chassis No : WAUZZZF43JA163696
Mileage :
Date In :
Liability : -
Excess Cost : -
Estimated By : Johnny Boo / Allan Wu
Accident Date : 1-Jan-19
Place of Accident : Lower Delta Road

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Estimated Labour Charges for Accident Vehicle S 9917 CD

S/n	Nature of Jobs	Estimated Charges
1	To remove and transfer rear parking aid and rear lid kick sensor assy. Check function.	S/N \$ 360.00 /
2	To dismantle and renew rear bumper. Re-organise rear crash management components. Reinstall all parts removed.	\$ 900.00 500 600 /
3	To respray rear bumper.	\$ 800.00 550 600 /
4	To carry out diagnostic check.	S/N \$ 192.00 /
TOTAL LABOUR CHARGES		: \$ 2,252.00

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Material List for Accident Vehicle Regn No. S 9917 CD

S/N	Parts Description		Damaged Parts & Prices S/Nett
1	REAR BUMPER / <i>DL</i>	\$	2,015.00 ✓
2	REAR BUMPER FIXING PARTS X <i>NN</i>	\$	66.00
3	REAR BUMPER SECURING PLATE ? X <i>UN</i>	4 \$	60.00
4	REAR BUMPER SEALING PLATE ? X <i>UN</i>	4 \$	10.00
5	REAR BUMPER SECURING STRIP ? X <i>UN</i>	\$	203.00
6	REAR BUMPER SPOILER ? X <i>UN</i>	\$	227.00
7	REAR LIGHT REFLECTOR LIGHT-LH/RH X <i>NN</i>	2 \$	76.00
8	REAR BUMPER CARRIER ? X <i>UN</i>	\$	819.00
9	REAR BUMPER SEAL 11.20 ? X <i>UN</i>	2 \$	25.00
10	REAR BUMPER GUIDE SECTION-LH X	\$	40.00
11	REAR BUMPER GUIDE SECTION-RH X <i>NN</i>	\$	41.00
12	REAR BUMPER UPPER GUIDE SECTION-RH/LH X <i>NN</i>	\$	40.00
13	REAR SENSOR / <i>DM</i>	2 \$	462.00 ✓
14	REAR SENSOR SEAL RING / <i>NCL</i>	4 \$	12.00 11.20 ✓
15	SUNDRIES ? X <i>UN</i>	\$	300.00
TOTAL SPARE PARTS CHARGES		\$	4,396.00
TOTAL LABOUR CHARGES		\$	2,252.00
GRAND TOTAL		\$	6,648.00

All charges are not inclusive of GST.

Legend : Remarks (OK) = Approved, Remarks (X) = Not approved
Spare parts are Special Nett.

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Name : *Eric Qian*
Surveyed Date : *08/1/19*
Authorised Date :
Excess Cost :
Liability : *before print photos.*
Remarks : *3 Days.*

Please Note : This estimate is based on visual inspection of the affected
Should we require further labour charges and spare parts
progress of repair, we shall inform you accordingly.
For inspection of vehicle, please refer to Ms Norah Khai at
Tel:6768 9828 for appointment.

Yours faithfully,
Premium Automobiles Pte Ltd

L&B 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:

Johnny Boo
Body Repair Manager

Allan Wu
Claims Consultant

Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

Telefax

Estimate : Accident Repairs
Workshop : Ubi Road 1
Contact No : 6366 2323
Fax No : 6841 1183
Reference : PA/TP/0008/2019/GW
Date : 3-Jan-19

Vehicle not in workshop. Kindly arrange for survey.

Your insured vehicle no: SHC 5187 B

AXA Insurance Singapore Pte Ltd

8 Shenton Way
#27-01 AXA Tower
Singapore 068811

Hi Guo Qiang

3 days -ok - jb - 6 Mar 19

Attn: Motor Claims Dept
Tel: 6880 4602 - Fax 6880 4838

Owner's Name : Mr. Jun HanSung
Address : 967 Bukit Timah Road
#05-13
Singapore 589663
Telephone : (HP) 84945624
Type of Claim : Third Party Claims
Policy No. : 1800060456
Vehicle No : **S 9917 CD**
Model Code : Audi A4 Sedan 2.0 TFSI
Model / Year : Jun-18
Engine No : CVK 061090
Chassis No : WAUZZZF43JA163696
Mileage :
Date In :
Liability : -
Excess Cost : -
Estimated By : Johnny Boo / Allan Wu
Accident Date : 1-Jan-19
Place of Accident : Lower Delta Road

Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

Telefax

Estimated Labour Charges for Accident Vehicle S 9917 CD

S/n	Nature of Jobs	Estimated Charges	
1	To remove and transfer rear parking aid and rear lid kick sensor assy. Check function.	S/N \$ 360.00	\$ 360.00
2	To dismantle and renew rear bumper. Re-organise rear crash management components. Reinstall all parts removed.	\$ 900.00	\$ 600.00
3	To respray rear bumper.	\$ 800.00	\$ 600.00
4	To carry out diagnostic check.	S/N \$ 192.00	\$ 192.00
TOTAL LABOUR CHARGES		: \$ 2,252.00	\$ 1,752.00

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Material List for Accident Vehicle Regn No. S 9917 CD

S/N	Parts Description	Damaged Parts & Prices	
		S/Nett	
1	REAR BUMPER	\$ 2,015.00	\$ 2,015.00
2	REAR BUMPER FIXING PARTS	\$ 66.00	
3	REAR BUMPER SECURING PLATE	4 \$ 60.00	
4	REAR BUMPER SEALING PLATE	4 \$ 10.00	
5	REAR BUMPER SECURING STRIP	\$ 203.00	
6	REAR BUMPER SPOILER	\$ 227.00	
7	REAR LIGHT REFLECTOR LIGHT-LH/RH	2 \$ 76.00	
8	REAR BUMPER CARRIER	\$ 819.00	
9	REAR BUMPER SEAL	2 \$ 25.00	
10	REAR BUMPER GUIDE SECTION-LH	\$ 40.00	
11	REAR BUMPER GUIDE SECTION-RH	\$ 41.00	
12	REAR BUMPER UPPER GUIDE SECTION-RH/LH	2 \$ 40.00	
13	REAR SENSOR	2 \$ 462.00	\$ 462.00
14	REAR SENSOR SEAL RING	4 \$ 12.00	\$ 11.20
15	SUNDRIES	\$ 300.00	
	TOTAL SPARE PARTS CHARGES	\$ 4,396.00	\$ 2,488.20
	TOTAL LABOUR CHARGES	\$ 2,252.00	\$ 1,752.00
	GRAND TOTAL	\$ 6,648.00	\$ 4,240.20

All charges are not inclusive of GST.

Legend : Remarks (OK) = Approved, Remarks (X) = Not approved
Spare parts are Special Nett.

Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

Telefax

Name :
Surveyed Date :
Authorised Date :
Excess Cost :
Liability :
Remarks :

Please Note : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges and spare parts in progress of repair, we shall inform you accordingly.
For inspection of vehicle, please refer to Ms Norah Khai at Tel:6768 9828 for appointment.

Yours faithfully,
Premium Automobiles Pte Ltd

Johnny Boo
Body Repair Manager

Allan Wu
Claims Consultant

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Foreign Identification Number
Owner ID:	9638M
Vehicle Details	
Vehicle No.:	S9917CD
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Jan 2019
Vehicle Make:	AUDI
Vehicle Model:	A4 SEDAN 2.0 TFSI S TRONIC (NAV)
Primary Colour:	White
Manufacturing Year:	2018
Engine No.:	CVK061090
Chassis No.:	WAUZZZF43JA163696
Maximum Power Output:	140.0 kW (187 bhp)
Open Market Value:	\$33,430.00
Original Registration Date:	14 Jun 2018
First Registration Date:	14 Jun 2018
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Jun 2028
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 08 Jan 2019

OK

◀ Service Request Details

Claim

S9M018PG

Reference

None ✎

Loss Date

1 January 2019

Request Date

2 January 2019

Due Date

9 January 2019

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Incident Only

Services

Pending verification - Direct Settlement

02/01/2019 @ 3:42pm
George veh not in

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration

S9917CD

Make

TPVD AUDI

Service Address

...

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD
No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

Owner Default

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

Catherine Chong (LKK Auto)

From: Claims <claims@premiumauto.com.sg>
Sent: Wednesday, 2 January, 2019 12:04 PM
To: SG AXA Insurance SM Claims Service Team; SG AXA Insurance SM AXA SGP - Motor Survey
Cc: 'Claims'
Subject: ACCIDENT INVOLVING S 9917CD AND YOUR INSURED SHC 5187 B DATED ON 01/01/2019
Attachments: S 9917 CD 01012018.PDF
Categories: Santosh

Dear all,

Kindly assist in the liability clearance for the above mentioned case. We propose for 100% direct settlement in our clients favour.

We herein attached the GIA report for direct settlement for your reference.

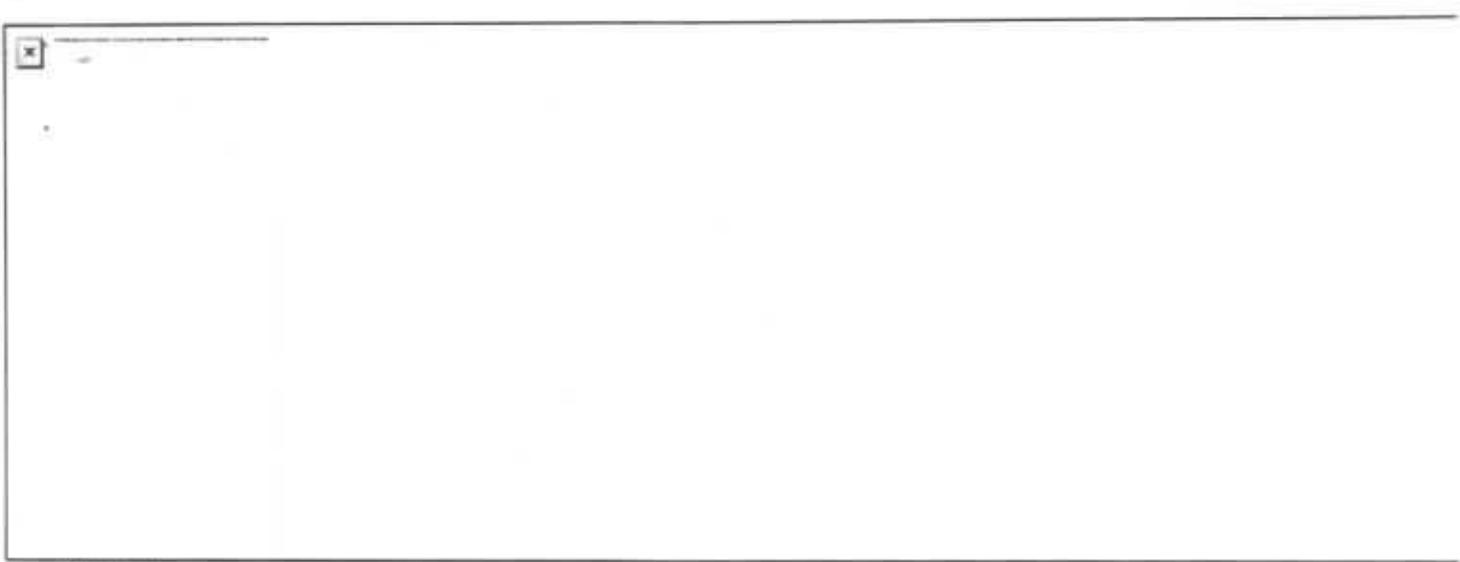
We will forward you the estimate once is available.

Do take note, kindly arrange the survey on 8/01/2019, (Tuesday) 1030AM. Owner waiting.

Thank you.

Best Regards,
George Wong
Claims Advisor

Premium Automobiles Pte Ltd (Reg No 199902271W)
55 Ubi Road 1 Road Singapore 408699
p. +65 6388 2323 d. +65 66900293 f. +65 6841 1183
e. claims@premiumauto.com.sg w. www.audi.com.sg
Audi Showroom, Audi Centre 281 Alexandra Road Singapore 159938 p. +65 6836 2223



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Re:RE: <MANDATE IA> S9M018PG

Type

🔔 Question

Message

pls proceed

Reply

Premium Automobiles

AXA Insurance Pte Ltd
 No 8 Shenton Way
 #27-01 AXA Tower
 Singapore 068811
Attn: Motor Claims Dept
Yr Ref: CC4/ASM19000143/hb3

Norah Khai
 6768 9911
 6841 1183
 Nora.khai@premiumauto.com.sg
 Body & Paint Dept
 PA/TP/0008/2019/MAS

3 May 2019

from
 Telephone +65-
 Telefax +65-
 EMail
 Our department
 Our Ref
 Your Ref
 Date

Dear Sir,

RE: INSURANCE CLAIM FOR S 9917 CD, Audi A4 Sedan 2.0 TFSI

With reference to the above-mentioned vehicle, no. **S 9917 CD**, claimant, **Mr. Jun Hansung**, please find the related document as per attached.

1. A copy of the Original invoice no. 85013731 – S\$4,537.01
2. A copy of Authorization to Act duly signed by client
3. A copy of the Release Voucher attached
4. Loss of Use – S\$300.00 (S\$100.00 x 3 working days)
5. A copy of LTA Search fee – S\$7.45

Based on the above document, we would appreciate you could expedite the payment soonest possible.

If you require any further clarification, please do not hesitate to contact me at 6768 9911.

Regards

This is a computer-generated document. No signature is required.

Norah Khai
 Claims Dept

Encls
 AXA – S 9917 CD

total pages

Premium Automobiles Pte Ltd
 Showroom
 9 Leng Kee Road
 Singapore 159090
 Telephone (65) 6566 1111
 Telefax (65) 6471 3733

Service & Parts Centres
 55 Ubi Rd 1
 Singapore 408699
 Telephone (65) 6336 2323
 Telefax (65) 684 11183

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G1819638M**



JUN HANSUNG

Birth Date: 14 Oct 1975
Issue Date: 27 Sep 2018
Valid Till: 25-09-2021

0028502320




**Ministry of Foreign Affairs
Singapore**

INTERNATIONAL ORGANISATION

FIN: G1819638M Card No: 009-000403

Name: JUN HANSUNG

Designation: DIRECTOR

Organisation: ASIA-PACIFIC ECONOMIC COOPERATION SECRETARIAT



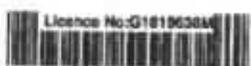
Date of Issue: 13-04-2018
Date of Expiry: 13-04-2021

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	27 Sep 2018

NP 428A

Licence No: G1819638M



This card is not transferable. The card should be returned to the Protocol Directorate, Ministry of Foreign Affairs, Singapore, on departure of the Bearer.

Loss of this card must be reported immediately to the Chief of Protocol, Ministry of Foreign Affairs, Singapore.

If found, this card must be returned immediately to the Protocol Directorate, Ministry of Foreign Affairs, Tanglin, Singapore 248163, or handed in at the nearest Police Station.





CERTIFICATE OF INSURANCE

AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : JUN HANSUNG
Period of Insurance : 14 Jun 2018 To 13 Jun 2019
Engine No. : CVK061090
Chassis No. : WAUZZZF43JA163696

Vehicle No. : S9917CD
Policy No. : 1800060456
Endorsement No. : 000000000219189
Issued Date : 02 Aug 2018

ABOUT THE COVER

Make/Model : AUDI A4 Sedan 2.0 TFSI S tronic
Engine Capacity/Tonnage : 1,984.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PARF : No

Person or Classes of Persons Entitled to Drive*

- a) The Policyholder
 - b) Any other person who is driving on the Policyholder's order or with his/her permission.
- This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1800cc - 2000cc: Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 188) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

JUN HANSUNG - \$500 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Audi Customer Service Center Add: 55 Ubi Road 1 Singapore 408889 63962323

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 188), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504125221

PREMIUM LEASING - SHE
 281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE
 SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
 AUTHORISED REPRESENTATIVE

ISSCAN

IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.

What can the 24-hour AIG Auto Emergency Hotline provide for you?

- Immediate assistance after an accident
- Emergency breakdown service
- Towing service (accident or non-accident related)
- Advice on Motor Claims procedures
- Medical Referral Assistance

If no one is injured in the accident:

- You are not required to make any police report
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s).
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.

If the accident involves injuries or damage to government property & vehicles, foreign registered vehicles or non-injury hit & run case:

- Report the accident to the police, providing full details of the circumstances of the accident.
- Record vehicle number, name and address, insurance company and policy number of the other driver(s) and vehicle(s), if applicable.
- Collect details (name, address and contact number) of witnesses and/or try to take photographs of the scene of the accident.
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.

What should I do in the event of an accident?

- Keep calm and move your car to a safe place.
- Do not admit or discuss fault or blame with the other party(ies)
- Report the accident to us with your accident vehicle (whether damaged or not) via our approved reporting centres or authorised repairers within 24 hours or the next working day of the accident.
- Submit Write/Summons/Correspondences from third party(ies) to AIG immediately.

LOSS OF USE CAR REPLACEMENT BENEFIT

Applicable only if this benefit is included in your motor insurance. Please refer to your Policy Schedule for details. Policy terms and conditions apply. Please call our customer service hotline number **(65) 6419-3000** for assistance.

The Certificate of Insurance (CI) should be produced without demand when collecting the Rental Car and the Rental Car Company reserves the right to verify the identity of the holder. The CI is the property of AIG and its use is subject to the terms and conditions contained in the Loss of Use Endorsement under the policy issued to the policyholder.

Steps to activate Loss of Use Car Replacement Benefit and Important Information

1. To activate your loss of use car replacement, please contact the Rental Car Company (listed below) after filing/reporting your accident claim.
2. Your rental car will be made available within **5** working hours of activation with the Rental Car Company.
3. At the time of collection of the Rental Car, the **original** insurance policy and schedule issued by AIG, a copy of the Accident Report from **Audi Customer Service Centre** must be produced.
4. The number of days is based on the period your vehicle is in the repair workshop unless the number of days of loss of use entitlement is stated in the Policy.
5. Rental cars are strictly for use in Singapore only.
6. Extension of rental beyond repair period approved by AIG surveyor will be chargeable by the Rental Car Company on per day basis.
7. Upgrade of Rental Car is available upon request subject to additional charges by the Rental Car Company.

Rental Car Company: Popular Rent A Car Pte. Ltd.

Activation Hotline: 67428888

501 Guillemard Road Singapore 399840

Operation Hours: Monday to Friday: 9am to 6pm Saturday (Half Day): 9am to 4pm

*The Rental Car Company's Terms & Conditions apply (i.e., refundable security deposit, excess liability for the Rental Car, Collision Damage Waiver, etc).

IMPORTANT NOTICE

If you sell your motor vehicle, this Notice is **IMPORTANT** and **MUST** be complied with. Policyholders are hereby warned that under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.99), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

The Policyholder is further warned that on the sale of a motor vehicle, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap.88).

This Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agrees to cover the new owner, they will issue a new Certificate of Insurance in the new owner's name. The premium chargeable may vary according to the new owner's profile.

Premium Automobiles

AXA Insurance Singapore Pte Ltd
8 Shenton Way
#27-01 AXA Tower
Singapore 068811
Attn: Motor Claims Dept
Your ref: SHC5187B

Norah Khai
6768 9828
6841 1183
Body Repair
From
Telephone +65-
Telex +65-
Our department
Your Claim Ref
Our Ref
Date
total pages

PA/TP/0008/2019/TF

22-Feb-19

1

RE : CLAIM-OWNER'S SATISFACTION/DISCHARGE VOUCHER

Make & Model : Audi A4 Sedan 2.0 TFSI
Vehicle Chassis No : WAUZZZF43JA163696
Vehicle Regn No. : S 9917 CD
Vehicle Mileage : 19911KM
Vehicle Owner : Mr. Jun HanSung
Certificate No : 1800060456
Liability : **Direct Settlement by Vic of LKK via email
Dated 1/2/2019 with LOU/LOR**
Accident Date : 1 January, 2019
Location : Lower Delta Road
Repair Cost : S\$ 4,537.01
WIP No. : 38043
Repairer's Name : Premium Automobiles Pte Ltd

Premium Automobiles Pte Ltd

Showroom

9 Leng Kee Road
Singapore 159090

Telephone (65) 6566 1111

Telex (65) 6471 3733

Service & Parts Centres

55 Ubi Road 1

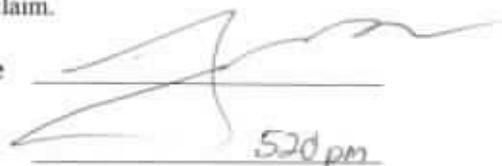
Singapore 408699

Telephone (65) 6366 2323

Telex (65) 6841 1183

I/We certify that the vehicle has been fully repaired to my entire satisfaction and that payment of the repairer's charges that are claimable under the policy will be deemed in full and final settlement of my claim.

Owner/Insured Signature



Time

5:20 pm

Date

22/2/19

Vic (LKKAuto)

From: Vic (LKKAuto)
Sent: Friday, 1 February, 2019 10:12 AM
To: claims@transcab.com.sg
Cc: Admin A; Vic (LKKAuto); carrisalee@ava-ins.com; foonghon@ava-ins.com; icewong@ava-ins.com
Subject: YOUR REF : P1680520 (SHC5187B)_ACCIDENT INVOLVING SHC 5187B AND S 9917CD AT/ALONG LOWER DELTA ROAD ON 01/01/2019

01 FEBRUARY 2019

TRANS-CAB SERVICES PTE LTD
SINGAPORE

Dear Sir/Madam,

OUR REF : CC4/ASM19000143/Ghb3
YOUR REF : P1680520 (SHC5187B)
ACCIDENT INVOLVING SHC 5187B AND S 9917CD AT/ALONG LOWER DELTA ROAD ON 01/01/2019

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s PREMIUM AUTOMOBILES PTE LTD acting on behalf of the owner of S 9917CD against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant. Unless proven otherwise.

Please be informed that your No-Claim Discount (NCD – if applicable) will be withheld for the time being. Pending for final allocation of liability in settlement by our principal.

We also wish to advise that there is an excess of S\$5,000/- attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim. The applicability of the excess is as follows:

- 1) Any settlement equal to or above the excess, you shall be liable to make the payment of \$5000/-; or
- 2) Any settlement below the excess, you shall be liable for the amount settled.

We shall keep you informed of the third party claim settlement and thereafter kindly let us have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by us for the above subject matter, we expressly reserve all our rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

As Insurers, we shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (if any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to AXA immediately. You may email it to cst@axa.com.sg / vicalpeh@lkkauto.com or deliver it by hand to our Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at vicalpeh@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

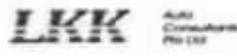
Best Regards,

Vic Alpeh | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email: vicalpeh@lkkauto.com | fax: 6741-4108

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

 *Save the Earth. Print only when necessary.*

This e-mail contain confidential and privileged material, and are for the sole use of the intended recipient. Use or distribution by an unintended recipient is prohibited, and may be a violation of law. If you believe that you received this e-mail in error, please do not read this e-mail or any attached items. Please delete the e-mail and all attachments, including any copies thereof, and inform the sender that you have deleted the e-mail, all attachments and any copies thereof. Thank you.

Letter of Authorization

Your ref: SHC5187B

Our ref: PA/TP/0008/2019/TF

22 February, 2019

Mr. Jun HanSung
967 Bukit Timah Road
#12-11
Singapore 589663

AXA Insurance Singapore Pte Ltd

8 Shenton Way
#27-01 AXA Tower
Singapore 068811
Attn: Motor Claims Dept

Dear Sir/ Mdm,

Accident involving S9917CD / SHC5187B Along Lower Delta Road on 1 January 2019.

I am the registered owner of S9917CD.

I confirm that I will be claiming for Rental Charges / Loss of Use and hereby authorize your esteemed company to settle Rental Charges / Loss of Use and repair bill directly with Premium Automobiles Pte Ltd.

Your kind attention will be greatly appreciated.

Yours faithfully,



Mr. Jun HanSung

Copy to Norah Khai, Premium Automobiles Pte Ltd



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHC5187B (Insd veh)	Model: Audi A4 Sedan
	S9917CD (TP veh)	
Date of Accident/ Time:	01/01/2019 @ 1250HRS	

Repair Estimate	: \$	7,115.36	
Final Repair Cost	: \$	4,587.01	
Loss of Use	: \$	300.00	5 days at \$ 100 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	4,844.46	
Payee Name : PREMIUM AUTOMOBILES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/No BOLA Scenario No: 21	
	BOLA Liability: 100 (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

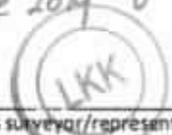
NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are not received within 7 days of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/i confirmed that this is a full and final settlement that we and/or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

	
Signature of Workshop representative / Workshop stamp	Signature of Witness / Workshop stamp (if applicable)
Name of Representative: <u>Cheng Chee Sing</u>	Name of Witness: <u>MASTURA OSMAN</u>
Date: <u>4 June 2019</u>	Date: <u>4/6/19</u>
	
Signature of AXA's surveyor/representative:	
Name of AXA's surveyor/Representative:	
Date:	



redefining / insurance

CLAIM REF : S9m19pca
INSURED : TRANS-CABS SERVICES PTE LTD

DISCHARGE VOUCHER

We/I [Jun HanSung], NRIC NO. G1819638M] hereby agree to accept the sum of dollars [FOUR THOUSAND EIGHT HUNDRED FORTY FOUR AND CENTS FORTY SIX ONLY] (S\$ 4,844.46) paid to us/me by AXA INSURANCE PTE LTD as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property that we/I may have against the said AXA INSURANCE PTE LTD or their Insured or the driver of motor vehicle no. [SHC5187B] as a result of an accident along [Lower Delta Road] on [1/1/2019] of which we/I were/was the driver/ owner/ hirer/ passenger/rider/pillion/ insurer of motor vehicle no. [S9917CD].

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for any further claim(s) whatsoever and whosoever present or future that we/I may have against the said Insurer, owner and/or driver of vehicle no. [SHC5187B] in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify AXA INSURANCE PTE LTD against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. [SHC5187B].

Dated this 04 day of June 2019

Claimant's Signature : [Signature]

NRIC no./ Company Stamp : G1819638M

Occupation/ Business : _____

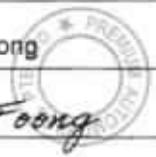
Address : _____

Telephone No. : _____

Witness's Name : Tony Foong

Witness's Signature : [Signature]

Witness's NRIC No. : G2040197X





Premium Automobiles Pte Ltd

Audi Centre Singapore
251 Alexandra Road
Singapore 119938
Main Telephone: 6336 2222
Main Fax: 6471 2152

Alexandra Service Centre
281 Alexandra Road
Singapore 159539
Telephone: 6388 2222
Telex: 6475 9221

Ubi Service Centre
55 Ubi Road 1
Singapore 408697

Customer Service
Service Appointment
24-hour Breakdown Service

6366 2222
6328 1233

customer.care@premiumauto.com.sg

INSURANCE TAX INVOICE

Company Reg. No. 199902271W
GST Reg. No. 199902271W

Page 1 13:58

AXA INSURANCE PTE LTD MOTOR CLAIM DEPT 8 SHENTON WAY, #27-01 AXA TOWER, SINGAPORE 068811 068811	Invoice: 85013731 Date : 03/05/2019 Order : 59917CD Term : 30	Account: A0008 (T 0) AXA INSURANCE PTE LTD MOTOR CLAIM DEPT 8 SHENTON WAY, #27-01 AXA TOWER, SINGAPORE 068811
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Regn No.: 59917CD (V 38218)	Regn Date: 14/06/2018	Mileage: 7899	WIP No.: 38043
Model: A4 SEDAN 2.0 TFSI BM2R0G (NAV,	Chassis: WAUZZZF43JA163696	Engine: CVK 061090	Dept: U
VSB No.:			
You have been assisted by :- UB-Jiayee (33)			

	Details	Qty	Unit Price	Amount
S	BODYWORK N: TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR ASSY.CHECK FUNCTION	368.00	1.00	368.00
S	BODYWORK N: TO DISMANTLE AND RENEW REAR BUMPER, REDORGANISE REAR CRASH MANAGEMENT COMPONENTS, REINSTALL ALL PARTS REMOVED	600.00	1.00	600.00
S	BODYWORK N: TO RESPRAY REAR BUMPER	600.00	1.00	600.00
S	BODYWORK N: TO CARRY OUT DIAGNOSTIC CHECK	192.00	1.00	192.00
X	ABW5807067A GRU COVER	1.00	2015.00	2,015.00
X	ASD09192758 GRU SENSOR	2.00	231.00	462.00
X	ASD0919133 704 WASHER	4.00	2.80	11.20

Parts 2,488.20
Labour 0.00
Sublet 1,752.00
Menus 0.00
Lubricant 0.00

Sub-Total 4,240.20
7% GST 296.81
Grand Total 4,537.01



Received by

For & on behalf of
Premium Automobiles Pte Ltd

Search
TP A GW

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 02 Jan 2019 / 08:59:56

Receipt Date/Time : 02 Jan 2019 / 08:59:56

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190102-000838

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHC5187B As at 01 Jan 2019/12:50:00 Insurance Co: AXA INSURANCE PTE LTD				
1	Insurance Enquiry - SHC5187B Enquiry Fee 20190102085836044909	7.00	0.49	7.49
Sub-Total		7.00	0.49	7.49
Total Before Rounding		7.00	0.49	7.49
Rounding Difference				0.04
Total Amount Payable				7.45
Paid By				
	xxxxxxxxxxxx2781		Credit Card: Visa/MasterCard	7.45
Total				7.45
Cash Change				0.00
Tendered Amount				7.45
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF



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

AXA INSURANCE PTE LTD

Ref : CC4/ASM19000143/Ghb3q2

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811
ATTN:STACEY

Date : 18-06-2019



Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SHC 5187B	Veh. Inspected	S 9917CD
Policy No.	VPX/P1680520	Coverage (\$)	0.00
Claim No.	S9M018PG	Excess (\$)	0.00
Assign From		Assign Date	03/01/2019

2. Vehicle Particulars & Condition

Make & Model	AUDI A4	c.c	1984
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	WAUZZZF43JA163696	Colour	WHITE
Odometer	5131	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	CONTINENTAL	9 mm
L/H Front Tyre	205/60 R16	CONTINENTAL	9 mm
R/H Rear Tyre	205/60 R16	CONTINENTAL	9 mm
L/H Rear Tyre	205/60 R16	CONTINENTAL	9 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	01/01/2019	Inspection Date	08/01/2019
Survey held at	PREMIUM AUTOMOBILES PTE LTD 55 UBI ROAD 1 . SINGAPORE 408699		

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:	3 Working Days
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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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. S 9917CD

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	REAR BUMPER (SN) (CONSISTENT)	DEFORMED	2,015.00	2,015.00
1	REAR BUMPER FIXING PARTS (SN) (CONSISTENT)	NOT NECESSARY	66.00	-
4	REAR BUMPER SECURING PLATE (SN) (CONSISTENT)	NOT NECESSARY	60.00	-
4	REAR BUMPER SEALING PLATE (SN) (CONSISTENT)	NOT NECESSARY	10.00	-
1	REAR BUMPER SECURING STRIP (SN) (CONSISTENT)	NOT NECESSARY	203.00	-
1	REAR BUMPER SPOILER (SN) (CONSISTENT)	NOT NECESSARY	227.00	-
2	REAR LIGHT REFLECTOR LIGHT -LH/RH (SN) (CONSISTENT)	NOT NECESSARY	76.00	-
1	REAR BUMPER CARRIER (SN) (CONSISTENT)	NOT NECESSARY	819.00	-
2	REAR BUMPER SEAL (SN) (CONSISTENT)	NOT NECESSARY	25.00	-
1	REAR BUMPER GUIDE SECTION -LH (SN) (CONSISTENT)	NOT NECESSARY	40.00	-
1	REAR BUMPER GUIDE SECTION -RH (SN) (CONSISTENT)	NOT NECESSARY	41.00	-
2	REAR BUMPER UPPER GUIDE SECTION -RH/LH (SN) (CONSISTENT)	NOT NECESSARY	40.00	-
2	REAR SENSOR (SN) (CONSISTENT)	DAMAGED	462.00	462.00
4	REAR SENSOR SEAL RING (SN) (CONSISTENT)	NECESSARY	12.00	11.20
1	SUNDRIES (SN) (CONSISTENT)	NOT NECESSARY	300.00	-
			4,396.00	2,488.20
LABOUR				
TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR ASSY .CHECK FUNCTION.			360.00	360.00
TO DISMANTLE AND RENEW REAR BUMPER .RE-ORGANISE REAR CRASH MANAGEMENT COMPONENTS .REINSTALL ALL PARTS REMOVED .			900.00	600.00
TO RESPRAY REAR BUMPER.			800.00	600.00
TO CARRY OUT DIAGNOSTIC CHECK.			192.00	192.00
			-	-
			-	-
			-	-
			2,252.00	1,752.00
GRAND TOTAL			6,648.00	4,240.20

Report Ref No. CC4/ASM19000143/Ghb3q2



RECOMMENDED COST OF REPAIRS			4,240.20
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Report,Ref No. CC4/ASM19000143/Ghb3q2

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

◀ Service Request Details

Claim

S9M018PG

Reference

CC4/ASM19000143/Ghb3q2 

Loss Date

1 January 2019

Report Date

2 Jan 2019 12:44:00 PM

Request Date

8 January 2019

Due Date

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Actions

Next Step

Wait for: Approve invoice

Add Invoice

Vehicle Information

Incident Vehicle Registration

S9917CD

Make

A4 SEDAN 2.0 TFSI

Service Address

...

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD
No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

NG Stacey
6568804351
stacey.ng@axa.com.sg

Additional Instructions

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

Document Type

Document SubType

+ Upload Documents

NAME	 LKKInvoice1 (13).pdf
TYPE	Invoice
SUB-TYPE	Surveyor/ Assessor expense
AUTHOR	LKK AUTO CONSULTANTS PTE LTD (TP)
DATE UPLOADED	19 June 2019

NAME	 PAYMENT BREAKDOWN_LKK.pdf
TYPE	Forms / Claim Documents

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  LTA SEARCH.pdf

TYPE Forms / Claim Documents

SUB-TYPE Others

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  LKKInspection (7).pdf

TYPE Forms / Claim Documents

SUB-TYPE Others

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  WORKSHOP INVOICE.pdf

TYPE Invoice

SUB-TYPE Repairer

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  AUTHORISATION TO ACT FORM.pdf

TYPE Forms / Claim Documents

SUB-TYPE POA / Authority Letter

DATE UPLOADED 19 June 2019

NAME  PAYMENT BREAKDOWN_EXPRESS SETTLEMENT FORM.pdf

TYPE Forms / Claim Documents

SUB-TYPE Satisfaction / Discharge Voucher

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  LKKAdjustment1a (9).pdf

TYPE Forms / Claim Documents

SUB-TYPE Others

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 19 June 2019

NAME  TP LOD.pdf

TYPE Forms / Claim Documents

SUB-TYPE Others

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

DATE UPLOADED 7 May 2019

NAME  MANDATE IA.pdf

TYPE Reports & Statement

SUB-TYPE Others

AUTHOR LKK AUTO CONSULTANTS PTE LTD (TP)

NAME	 LKK REINSPECTION PHOTOS.pdf
TYPE	Reports & Statement
SUB-TYPE	Others
AUTHOR	LKK AUTO CONSULTANTS PTE LTD (TP)
DATE UPLOADED	3 May 2019

NAME	 LKK INSPECTION PHOTOS.pdf
TYPE	Reports & Statement
SUB-TYPE	Others
AUTHOR	LKK AUTO CONSULTANTS PTE LTD (TP)
DATE UPLOADED	3 May 2019

NAME	 TP ESTIMATE- MARKED.pdf
TYPE	Forms / Claim Documents
SUB-TYPE	Estimate / Quotation
AUTHOR	LKK AUTO CONSULTANTS PTE LTD (TP)
DATE UPLOADED	3 May 2019

NAME	 Email to OI dd 010219.pdf
TYPE	Letters and Correspondence
SUB-TYPE	Policy Holders / Insured
AUTHOR	LKK AUTO CONSULTANTS PTE LTD (TP)

NAME	 EMAIL.msg
TYPE	Letters and Correspondence
SUB-TYPE	Others
AUTHOR	KADRI Mateen
DATE UPLOADED	10 January 2019

NAME	 SHC5187B INSD GIA.PDF
TYPE	Reports & Statement
SUB-TYPE	GIA Report
AUTHOR	NIKAM Santosh Pandurang
DATE UPLOADED	2 January 2019

NAME	 EMAIL FROM WORKSHOP INCLUDNG S9917CD TP GIA.msg
TYPE	Letters and Correspondence
SUB-TYPE	Workshop
AUTHOR	NIKAM Santosh Pandurang
DATE UPLOADED	2 January 2019
