

INS CASE OWNER:

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LKK:

IDAC:

Surveyor:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation 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:

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

(Agreed / Assessed)

BOLA S/N No.:

If NO or B 28, Ass. Lia:

Repair Cost:

SS

Loss of Rental (LOR):

SS

516.24

(

3

days)

x

172.08

Loss of Use (LOU):

SS

-

(

3

x

days)

Loss of Income (LOI):

SS

150

(\$

50

x

3

days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search

SS

7.49

Medical:

SS

Disbursement:

SS

(e.g. Tow/ Independent)

Legal Cost

SS

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

SS

1583.23

Global Sum SS:

1580.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

1580.00

Name 1:

Comfort Delgro Engineering Pte Ltd

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:



Date/Time: 28.12.2018 16:42

Page : 1

Team: ARC Repair TP(CLSO)1

## JOB CARD

Sales Order:

JC NO.: 305255136

STOMER

VMS

STOMER NO.

DRESS

(F)

(P)

COMFORT TRANSPORTATION PTE LTD *YAP*

7010045

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

(O)

ICOUNT CARD NO.

REGN NO.:

SH 8134C

MILEAGE

MAKE:

MERCEDES BENZ

FUEL

E 1/2 F

MODEL

E220CDI (E6)

DATE/TIME IN

28.12.2018 13:30

YR OF MANU.

13.05.2015

TARGET DATE

CHASSIS CODE

WDD2120012B171500

COMPLETION DATE/TIME:

## JOB DESCRIPTION

Accident Date: 27.12.2018

NATURE: 3P 27.12.2018

S/NO

LABOR CODE

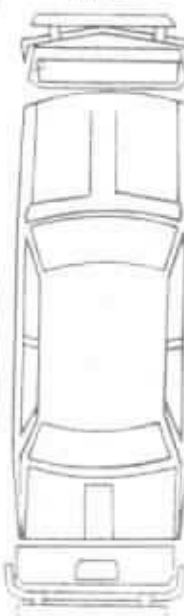
*AXA - Front damage*

DESCRIPTION

FRONT



LEFT SIDE



REAR



RIGHT SIDE

ECKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

Exit Pass

1

2

e No.:

SH 8134C

LARRY

Vehicle No.:

SH 8134C

*Larry Ng*

of Service Advisor

Signature/Date

Name of Service Advisor

Date

returned to Service Reception upon collection

To be kept by Security Guard

## REPAIR ESTIMATE\*

DATE: 28. Dec. 2018

DOA: 27. Dec. 2018

**AXA**[illegible]

Our Job Ref No : 305255136  
Date : 3. Jan. 2019

## COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

### FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SH 8134C

Date of Accident: 27. Dec. 2018

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: AXA SDY9008R

2. The finalized amount shall be:

(a) Spare Parts after List discount

(b) Labour Charges

Total for Part-By-Part Repair Cost

(c.) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less:

Final Lumpsum Repair cost

\$850.00

3. Estimated normal period for repairs: 1 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : Kater

Date : 4/1/19

### For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees				
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

Final Amount Subject to Insurance Approval

## REPAIR ESTIMATE\*

VEHICLE NO : SH 8134C

DATE: 28. Dec. 2018

MAKE : MERCEDES

MODEL : E220 (E6)

DOA: 27. Dec. 2018

AXA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
1	Radiator Grille <i>crn</i>			\$1,220.00
SUB TOTAL				\$1,220.00
LESS 20%				\$244.00
DISCOUNTED TOTAL				\$976.00
Labour Charge				\$-
1	Panel Beating			<del>\$200.00</del> 100
TOTAL LABOUR				\$200.00
ESTIMATE TOTAL				\$1,176.00
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

KKK Auto Consultants hence notify the Repairer of the following:

- To resurvey damaged parts during resurvey
- Parts prices are subject to confirmation
- No legal modification is allowed
- Supplementary items must be inspected and is subject to final approval from insurance company

Acknowledged by Repairer  
Signature:  
Date:

*Kahin 11/11/14*  
*31/12/18 0930h.*  
*10y*  
*4/5*  
*After Repair p ltr*

Larry Ng



Auto  
Consultants  
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 409533 TEL : (065) 62563561 FAX : (065) 62564315

## Immediate Advice

To : AXA Insurance Pte Ltd

Date: 28/03/2019

### Survey Details:

Date of loss	27.12.2018
Date of appointment	31.12.2018
Date of survey	31.12.2018
Location of survey	COMFORTDELGO ENGINEERING PTE LTD

### Vehicle Details:

Claim Type:	Third party
Vehicle number	SH 8134C
Make and Model	MERCEDES BENZ E220 - 2143CC
Date of registration	13.05.2015
Excess	
Market Value	-
Part Rebate	-
Nett Loss	-

### Repair details:

Initial Estimate	\$ 1,176.00
------------------	-------------

### Proposed/Revised repair cost:

Parts	\$ 976.00
Check items (estimate)	\$ -
Labour	\$ 100.00
Total	\$ 1,076.00
Lump Sum(if applicable)	\$ 850.00

Number of days for repair	1
---------------------------	---



## <IA> (OUR REF: CC4/ASM19000209/K1pa3) ACCIDENT INVOLVING SDY 9008R & SH 8134C ON 27/12/2018

Type

Question

Message

LIABILITY: 100% - TOTAL QUANTUM LESS THAN \$5,000, SO WE WILL PROCEED TO SETTLE & NEGOTIATE WITH THIRD PARTY.

Reply



Our Ref : T 1218/ SH 8134C /WT(st)

Your Ref :

Date : 14-Jan-19

**AXA Insurance Pte Ltd**  
8 Shenton Way  
#24-01, AXA Tower  
Singapore 068811

**Attn : Motor Claims Department**

CDGE Taxi Claims Dept  
59 Loyang Drive 4th Flr  
Singapore 508969

ComfortDelGro Engineering Pte Ltd  
205 Braddell Road Singapore 579701

Mainline +65 6383 6280  
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 1100804997

**Workshops**

**Braddell**  
205 Braddell Road  
Singapore 579701

**Loyang**  
59 Loyang Drive  
Singapore 508969

**Sin Ming**  
383 Sin Ming Drive  
Singapore 575717

**Pandan**  
45 Pandan Road  
Singapore 609286

**Ubi**  
320 Ubi Road 3  
Singapore 408649

**Senoko**  
24 Senoko Loop  
Singapore 758156

**Sungei Kadut**  
7 Sungei Kadut Way  
Singapore 726791

**Yishun**  
Yishun Industrial Park A  
Singapore 768732

**WITHOUT PREJUDICE**

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SH 8134C YOUR INSURED SDY9008R**  
**AND OTHER ON 27.12.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor vehicle No : SH 8134C which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving : SDY9008R we are submitting these claim for your consideration on behalf of the claimants.

**TAXI OWNER'S CLAIM**

1	Cost of Repair		\$	909.50
2	4 days Loss of Rental @	\$ 172.08 per day	\$	688.32
3	Survey Report Fees	(Surveyed by M/s LKK)	\$	-
4	GIA / LTA Search Fee		\$	7.49
5	GIA / Police Report Fees		\$	-
6	Towing Fees		\$	-
<b>Sub Total :</b>			\$	<b>1,605.31</b>

**HIRER'S CLAIM**

7	4 days Loss of Income @	\$ 80.00 per days	\$	320.00
<b>Total Claims:</b>			\$	<b>1,925.31</b>

We enclose herewith the following documents to support the claims: -

- Original repair bill and photocopies of photographs 4 pcs
- LTA search slip/s of : SDY9008R
- GIA / Police report/s of : SH 8134C
- Letter of authority from owner / hirer / operator
  - ( ) Photocopy/s of Accident Scene Photo/s ( ) Towing/Medical bill/receipts
  - ( ) Witness statement/s (x) Rental Rate letter (x) Downtime/Mileage record

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

*William Tan*

CDGE Claims Department

Tel: 6214 8737 Fax : 6214 1843 Email : williamtan@cdge.com.sg

This is a computer generated letter. No signature is required.



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

27 FEB 2019

NG YONG HWEE  
2 SENNETT DRIVE  
SINGAPORE 466972

Dear Sir/ Mdm

OUR REF : CC4/ASM19000209/K1pa3

YOUR REF : SDY 9008R

ACCIDENT INVOLVING SDY 9008R AND SH 8134C ALONG/AT TANJONG KATONG  
ROAD/SIDE ROAD PARKING LOTS ON 27/12/2018

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 CDGE LOYANG acting on behalf of the owner of SH 8134C against your motor insurance policy.

Based on the accident report and accident scenario, we are of the view that liability is not in your favour as you reversed and collided onto third party vehicle. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

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 us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 10 days from the date of this letter **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 AXA's prior knowledge and consent.

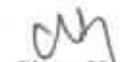
This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

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 [chewht@lkkauto.com](mailto:chewht@lkkauto.com).

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

Yours sincerely



Chew Hsiao Tong

Case Handler

DID: 6742 3197

FAX: 6741 4108

EMAIL: [chewht@lkkauto.com](mailto:chewht@lkkauto.com)

Cc *AXA Insurance Pte Ltd*  
*(Motor Claims Dept)*

**LETTER OF AUTHORISATION**

(NAF / PAF)

**ACCIDENT INVOLVING** **MERCEDES E220 SH8134C , SDY9008R** **ON 27-Dec-18 02:40**  
**ALONG** **ALONG TANJONG KATONG RD OPPOSITE PARKSTONE RD JUNCTION**

I / We **TAI CHIE KAYE MICHAEL** (Hirer) NRIC No.: **S1496711G**

and/or **TEO GEK CHEONG** (Relief) NRIC No.: **S0334514I**

Taxi Number **SH8134C**

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of **"ComfortDelGro Engineering Pte Ltd"**.

Date **28-Dec-2018**

Name of Hirer **TAI CHIE KAYE MICHAEL**  
Hirer NRIC **S1496711G**

Signature :



Address **105C EDGEFIELD PLAINS #09-65**  
**823105**

Contact No. **96337093**

Name of Relief **TEO GEK CHEONG**  
Relief NRIC **S0334514I**

Signature :



Address **53 HAVELOCK ROAD 27-112**  
**161053**

Contact No. **85222773**



redefining / insurance

CLAIM REF : S8M018EQ  
INSURED : NG YONG HWEE

### DISCHARGE VOUCHER

We, **ComfortDelgro Engineering Pte Ltd** confirm that by letter of authorisation dated 28/12/2018, we are authorised to and do hereby give this discharge for ourselves and on behalf of Comfort Transportation Pte Ltd and the Hirer, Teo Gek Cheong of vehicle no. SH8134C.

Now we **ComfortDelgro Engineering Pte Ltd** for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars **ONE THOUSAND, FIVE HUNDREDS AND EIGHTY** only (**S\$1,580.00**) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no (SDY 9008R) arising out of an accident with (SH 8134C) on 27/12/2018.
- declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SDY 9008R arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- We hereby declare that I/we am/are 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 in favour of **ComfortDelgro Engineering Pte Ltd** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. SDY 9008R.

Dated this 05 day of April 2019

Signed by \_\_\_\_\_  
(AUTHORISED SIGNATORY)

Company Stamp \_\_\_\_\_  
COMFORTDELGRO ENGINEERING PTE LTD  
88 LIOANG DRIVE  
SINGAPORE 535113

Witness : \_\_\_\_\_  
Name : \_\_\_\_\_  
I/C No : \_\_\_\_\_  
Address : \_\_\_\_\_

Please forward your cheque made payable to:  
**COMFORTDELGRO ENGINEERING PTE LTD**

## TAX INVOICE

8010010

AXA INSURANCE PTE LTD

8 SHENTON WAY AXA TOWER #24-01  
SINGAPORE 068811

CONTACT NO: 63387288

VEHICLE NO  
SH 8134C

MAKE  
MERCEDES BENZ

MODEL  
E220CDI (E6)

DATE OF REG  
13.05.2015

CHASSIS CODE  
WDD2120012B171500

NO/DATE  
91419110 09.01.2019

JOB NO.  
305255136

ODOMETER READING

JOB TYPE

Description : 3P 27.12.2018

### Invoice for Lump Sum Repair

Total Lump Sum Repair Amt	850.00
Add GST @ 7.000 %	59.50
<b>Total Invoice amount</b>	<b>909.50</b>

Issued by : CHEWBELENG 09.01.2019 14:42:35  
Repair Type : CLSO/57/57  
Payment Type/Term : /Credit 30 days

1. WHILE TAKING ALL REASONABLE PRECAUTIONS AGAINST THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARE OF OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND PARKED AT OWNERS' RISK.

2. CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL, WITHIN FIFTEEN (15) DAYS, ADVISE THE COMPANY IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLE WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.

3. INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAILY BASIS IN RESPECT OF ANY AMOUNT DUE AND UNPAID BY THE COMPANY BY THE CUSTOMER AND MUST PAID ON THE DUE DATE OF PAYMENT OR, AFTER 90 DAYS FROM THE DUE DATE, WITH THE PERIOD OF DEFAULT.

4. PLEASE EXAMINE THE INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THE INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd  
A member of COMFORTDELGRO

Head Office:  
205 Braddell Road  
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.

Our Ref: CT18120783

Date: 09 January 2019



**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

ACCIDENT ON                      27/12/2018    @   02:40 hrs  
ALONG                                ALONG TANJONG KATONG RD OPPOSITE  
   PARKSTONE RD JUNCTION  
INVOLVING                         SDY9008R

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SH8134C** (the "Taxi"). The Taxi was hired to **TAI CHIE KAYE MICHAEL IC NO S1496711G** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$172.08** per day (inclusive of GST).

Please be advised that the Taxi was insured with **India International Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay  
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

[illegible]



## Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
SDY9008R	27 Dec 2018 / 02:40:00	Successful	A12	AXA INSURANCE PTE LTD

[Previous](#)[OK](#)

548134 L

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SDY 9008R (Insd veh)	Model:	MERCEDES BENZ E220
	SH 8134C (TP veh)		
Date of Accident:	27/12/2018		

Global Sum Settlement	:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Repair Estimate	:	\$	1,258.32
Final Repair Cost	:	\$	909.50
Loss of Token Sum	:	\$	150.00
Rental (if any)	:	\$	516.24
LTA / GIA Search Fee	:	\$	7.49

Others:	:	\$	0.00
---------	---	----	------

	:	\$	
Final Settlement Sum (Global Sum)	:	\$	1,580.00

Is Third Party Workshop GIA Registered? ☒ YES ☐ NO (Kindly indicate below)

A) For Non GIA Registered Workshop: Agreed Liability \_\_\_\_\_ (%)

B) For GIA Registered Workshop: BOLA Applicable: Yes/ No BOLA Scenario No: \_\_\_\_\_

BOLA Liability: \_\_\_\_\_ 100 \_\_\_\_\_ (%) Assessed Liability (\*): \_\_\_\_\_ (%)

\* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.

Remarks \_\_\_\_\_

Payment Instruction: Payee's Breakdown			
1)	COMFORTDELGRO ENGINEERING PTE LTD	:	\$ 1,580.00

JOANNE LEE KHANG MIN  
LKK Auto Consultants Pte Ltd

24/04/2019  
Date

Please attach all the supporting documents to the form.  
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

**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/ASM19000209/K1pa3q2

8 SHENTON WAY #24-01

AXA TOWERSINGAPORE 068811

Date : 24-04-2019



ATTN:VALE OH

Code : ASM

**1. Policy Particulars :- THIRD PARTY CLAIM**

Insured Veh.	SDY 9008R	Veh. Inspected	SH 8134C
Policy No.	VPA/P2093497	Coverage (\$)	0.00
Claim No.	S8M018EQ	Excess (\$)	0.00
Assign From		Assign Date	31/12/2018

**2. Vehicle Particulars & Condition**

Make & Model	MERCEDES BENZ E220	c.c	2143
Engine No.	HIDDEN	Year of Reg.	2015
Chassis No.	WDD2120012B171500	Colour	WHITE
Odometer	525588	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

**3. Conditions of Tyres**

	Size	Make	Balance
R/H Front Tyre	225/55 R16	WEST LAKE	7 mm
L/H Front Tyre	225/55 R16	WEST LAKE	7 mm
R/H Rear Tyre	225/55 R16	WEST LAKE	7 mm
L/H Rear Tyre	225/55 R16	WEST LAKE	7 mm

**4. Description of Damages**

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION. DAMAGES SEE DETAILS.
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**5. General Information**

Accident Date	27/12/2018	Inspection Date	31/12/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

**5a. Remarks**

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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**5b. Estimate Days of Repair**

ESTIMATED NORMAL PERIOD FOR REPAIR:	1 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

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## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 8134C

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	<b>REPLACEMENT OF PARTS</b>	CRACKED		
	RADIATOR GRILLE (CONSISTENT)		1,220.00	1,220.00
	LESS 20% DISCOUNT		-244.00	-244.00
			976.00	976.00
	<b>LABOUR</b>			
	PANEL BEATING.		200.00	100.00
			200.00	100.00
<b>GRAND TOTAL</b>			<b>1,176.00</b>	<b>1,076.00</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>850.00</b>

Report Ref No. CC4/ASM19000209/K1pa3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

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

SJA4018EQ

Reference

CCA/ASM19000209/K1a3a2

Loss Date

27 December 2018

Report Date

29 Dec 2018 12:00:00 AM

Request Date

31 December 2018

Due Date

Vendor Name

LKH AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Vehicle Information

Incident Vehicle Registration #

5H8134C

Make

TPVD

Model

MB WHITE TAXI

Service Address

Primary Contact/Insured

NG YONG HWEE

2 SENNETT DRIVE, 466972, Singapore

64461813

YHWEENG@SINGNET.COM.SG

Claim Handler

OH Vale

6548904897

vale.oh@axa.com.sg

Actions

Next Step

Wait for Approval Invoice

Add Invoice















Additional Instructions

Document Type

Document SubType

Upload Documents

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
Accident Statement	Reports & Statement		Merimen	
LKHInvoice1 (5).pdf	Invoice	Surveyor/ Assessor expense	LKH AUTO CONSULTANTS PTE LTD (TP)	26 April 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 RENTAL RECEIPT.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 RENTAL MILEAGE.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 Payment Breakdown.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LTA SEARCH.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LOD.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LKK Inspection (7).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LKKAdjustment1a (4).pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LKK PHOTO-2.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LKK PHOTO.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 DISCHARGE VOUCHER.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 AUTHORISATION TO ACT FORM.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 WORKSHOP INVOICE.pdf	Invoice	Repairs	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LETTER TO OI.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	26 April 2019
 LA.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	28 March 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 PRI FROM WORKSHOP WITH TP GIA 548134C.mig	Forms / Claim Documents	Others	KUMAR Shalendra	31 December 2018