From (Ferson)	Coffeine this or CTI	Date/Time: 10/11196 11-1900
OD FIP WS	/TP RES / OD RES / EVA / INV / MV 7 CS	
To Inspect Vel		naured: YL 3072M
at Workshop n		
of	74 84 900 FOOLY 7/VC	
	OMCVSN7764201801 Claim No. S	MMIADSOOILA
Sum Insured:_	Excess	
Make of Veh: (Client's Record)		D.O.A. 21/10/2018
CA / REV /	REP. / REV 24 HRS up/	H.O.D. Endorseigent
Date/Time: /	310m3 (0/119 Person Contacted Juyden	Vehicle IN OUT
Date/Time	Action/Instruction (V) Estimate	
	PC 595 U - X	
	YL3072M-NA/CTI16007418/13	aun: 2/04/2016
11/1/19-	vehicle was not In on allowing.	1.75

Rosm	<b>३</b> ६६८५
	SOLGNATENT
From Date Estimated Cost.	Type: M.Car / M.Cycle 2001 Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To lespect Vehicle No. 9C 555U	Make 15424 LT 434P7-85M7 60 7790
at Workshop mass Crown ASIA	Colour MULT( AC Insured / Std / NI / NA
Ho, 44 should know STI	Sp.Reading 244449 T/Radio Insured / Std / NI / NA
Insured	EngiNa
Policy No.	CANO JALLT 434 PF TONO 150
Claims No.	Gen. Cond. Good Poor / Burnt
Sum insured Excess	Steering: Iperd / Jammed / Leaked / Burnt or •
(Client's Record)	Brake: Norder / Jammed / Leaked / Burnt or
Make of Volt	Modi Mil/ S/Rim / STD A/Rim or
(Policy Condition) 10 cm - D pm Remark: The veh had commenced its repair at the time of inspection.	Tyre Size: F:
Bal, or Market Value	Front Rear
IDAC Accident Rport Consistent? Yes or No	R/Bal. 8 mm R/Bal. 8/8 mm
GIA PR Seen: Consistent? Yes or No	L/Bal 8 mm L/Bal 8/8 mm
Est Repain. days Res. Yes or No	Survey held at CROWN 4511
Luni Sum: % 3 Val. Yes or No	Selficinal Meson Miles
CA / REV / REP. / 24 HRS Vehicle: IN	OUT Description of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or
Date Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction	
RECE	VED 0 8 JUL 2019

08/07/19 1) Typ-4	: Preli. Report	1000	s Of Repair: urvey No. of To	7/rip: 7/	Survey Fee Transportation	210
		Add Fee:	Site Insp : (	\$	1_5+B0_5	
			Hillert/9997	5	I) Miles	
Report Format :	Pret		Tech lovs !	\$	VI CHOICE	
Lump Sum / I.B.f: /5			West-end 5	5	0.0	
					TOTAL	220

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

Case /	VotiTies:	Est Submitted	Adj. Assigned	Alti Rot:	Adj Su	birtitted	Disc Authlied:	Status	
Main	10 Jan 2019		10 Jan 2019 11:53 Assign					Delin Control	Assignment el Case
94	aln:	Re	ference		Claim Details		Docume	ents	Show All
LAIM SUB	FOLDER DE	TAILS				[Create	ed by insurer]		*
nsured:							State of the second		
fain Ilaimant:	UNKNOW	N, Co. Reg. No.	NIL						
Vehicle Reg. No.:	PC595U				Date of Loss	24/12/2	2/2018 00:00 - :59		
Claim Type:	TP / SNM19D200119				Policy/Cover Note No.:	DMCVSN1764201801			
/ehicle Reg. lo. Insured):	YL3072M				Policy No. (Claimant):	DMCVSN1764201801			
					Excess:	5\$1.00			
epairer:	Crown As	ia Bus Builder Pt	e Ltd (sungel k	(adut) (HQ	44 Sungei Kad	lut Ave, 72	29667 Sungel Ka	dut - Tel:	
landling nsurer:		ping Insurance (							
Claimant's Insurer:	China Tal	ping Insurance (	Singapore) Pte	. Ltd. (HQ)	- Tel: 6389 61	11			
djuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Final Rpt	due 21/	01/2019]		
SSOCIATE	D MAIL RE	CEIVED	11-0		and Control of the Control			View All	Compose Case Mai
here are no	mail for this	case.						1747 741	Compase Case ma
ALL ASSOC	IATED TAS	ks⊟				View A	II Carack Total	l emin	
Due Date	Priority	Type Task	Second Fort		man water				New Task   Complet
o results.	0.0000000000000000000000000000000000000	(Alex: 1999)	Group Subj	ect Hand	ner: Assign	ned By	Completed C	IN Cri	rated On Done

### Nivitha (LKK Auto)

From:

Catherine Thia <catherine.thia@sg.cntaiping.com>

Sent:

Thursday, 10 January 2019 11:19 AM

To:

Admin A; 'assignments' claims@crownasia.com.sq

Subject:

FW: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin

Bee Road (HVP) - reported on 27.12.18

Dear LKK oic.

We refer to the above reference. Please attend to the PRI inspection

We will create in Merimen shortly

Thanks

### Catherine Thia

Senior Executive Motor Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Direct (65) 6389 6193 www.sg.cntaiping.com



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From: Claims [mailto:claims@crownasia.com.sg]

Sent: Thursday, 10 January, 2019 10:29 AM

To: Catherine Thia <catherine.thia@sg.cntaiping.com>

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>

Subject: RE: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP) - reported

on 27.12.18

Dear Catherine,

We select LKK as SJE

Thanks and Best Regards,

Jayden

Crown Asia Bus Builder Pte Ltd

Tel: 6467 0956 (ext. 112) Fax:6469 4319

Email: jayden@crownasia.com.sg

44 Sungei Kadut Ave, Singapore 729667

From: Catherine Thia <catherine.thia@sg.cntaiping.com>

Sent: Wednesday, 9 January, 2019 4:52 PM

To: claims@crownasia.com.sg

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>

Subject: RE: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP) - reported

on 27.12.18

Dear Jayden

We refer to the above reference.

Tried to call you, but no one picked up. We only have LBS and LKK to choose from. Kindly let us know which one you prefer. We will assign immediately

Thanks

### Catherine Thia

Senior Executive Motor Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #16-00 Springleaf Tower Singapore 079909
Direct (65) 6389 6193
www.sq.cntaiping.com



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From: Claims Dept of CTI

Sent: Wednesday, 9 January, 2019 12:24 PM

To: Catherine Thia <catherine.thia@sg.cntaiping.com>

Cc: Alfred Toh <alfred.toh@sg.cntaiping.com>; Chee So Chow <sochow.chee@sg.cntaiping.com>

Subject: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP) - reported on

27.12.18

From: Claims [mailto:claims@crownasia.com.sg]

Sent: Saturday, January 05, 2019 11:09 AM

To: Claims Dept of China Taiping Insurance < e-claims@sg.cntaiping.com>

Subject: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP) - reported on

27.12.18

Dear Sirs,

Reminder.

Thanks and Best Regards, Jayden

TOWN TO THE PARTY OF THE PARTY

Crown Asia Bus Builder Pte Ltd
Tel: 6467 0956 (ext. 112) Fax:6469 4319

Email: jayden@crownasia.com.sg

44 Sungei Kadut Ave, Singapore 729667

From: Claims <<u>claims@crownasia.com.sg</u>> Sent: Friday, 28 December, 2018 12:04 PM

To: 'e-claims@sg.cntaiping.com' <e-claims@sg.cntaiping.com>

Subject: Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP)

Dear Sirs,

We would like to submit a Traffic accident involving PC595U and YL3072M on 24/12/2018 at Forth Chin Bee Road (HVP)

Please find all the attached documents for you reference.

Kindly provide to us a list of 10 surveyors to choose as SJE

Thanks and Best Regards,

Jayden

Crown Asia Bus Builder Pte Ltd

Tel: 6467 0956 (ext. 112) Fax:6469 4319

This email has been scanned by the Symantec Email Security.cloud service.

For more information please visit <a href="http://www.symanteccloud.com">http://www.symanteccloud.com</a>

This email has been scanned by the Symantec Email Security.cloud service.

For more information please visit <a href="http://www.symanteccloud.com">http://www.symanteccloud.com</a>

Email: jayden@crownasia.com.sg

44 Sungei Kadut Ave, Singapore 729667

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

EMail Address

- 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.
- Any false reporting may be referred to the Police for investigation.
   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

	ACCIDENT STATEMENT
Date Of Report	26/12/2018 14:13
Date Of Accident	24/12/2018 12:40
Exact Location Of Accident	AT FORTH CHIN BEE RD (HEAVY VEHICLE CARPARK)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PC595U
Insured/Policyholder	
Name Of Registered Owner	MILLENNIUM TOURS COACH SERVICE PTE. LTD.
Co Reg No	201108666G
Email Address	OPERATION@RUIFENG.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64670956
Vehicle Particulars	
Manufacturer	ISUZU
Model	LT434P 7.8 SMT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	BUS
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5083349398-02
Cover Note Number	
Driver	
Name of Driver	ZHANG QIANG
Passport No/FIN	G2594811X
Date Of Birth	01/05/1984
Occupation	OUTDOOR
Date Of Driving Pass	09/11/2015
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91308911
Fax Number	
Contact Number	

NOEMAIL

Address

NA

Postcode

Was driver an employee of the Insured's Company YES

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

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

40

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

, 20

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

NO

Number of Passengers (Including Driver)

1

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

AS PER SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YL3072M

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

ONG WEY SONG

NRIC/Passport Number

S7146945Z

Contact Number

97356528

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

### IMPORTANT NOTICE

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

- 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 "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Yvonne Toh g Centre Personnel's Signature

NRIC/FIN No.:

### Accident Sketch Plan Pg. 1

KETCH PLAN		DE LEGICIA CALL	
A > DC 595 U			++
B > Ar 30tzw	1/1/2		
	1 18		
			-
		are the sum of the	
ESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
Accident Date & Time : `	14 Dar 2018 1240 c	im	
, , , , , , , , , , , , , , , , , , ,	TOTAL CITY DE NOT CHEE	diane alan	
	الا به مادهان ، است	a alma santual sant	ion
			40.41
alliged also win	havings myle warms o	VEHRISE	
	y.		
12		1	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Accident Date & Time: 24 Dec. 2018, 1240 om  Accident Location: At Fouth Chin Bee Rd. Cheany Varicle Capars    parted my varicle on the obove-mentional boothon:   wood in my whice preparing to go when auddenty I feet on import from the side of my varicle. I noted that van 8 had action with the side of my varicle. I noted that van 8 had action while making a varieus.    Reporting Only   Own Damage   Third Party   Claim at other workshop (OOTP)    DECLARATION   We declare the forgoging particulars are true in every respect.			
	We declare the foregoing part	iculars are true in every respect. ***** Fourte	EN 14 days come electric for the most be made effect the exputered to
Mary Nove No.	3438	V.	in Tak
olicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Sign	
Nate & Time:	(If driver is not the policyholder)	Name	

### **Accident Photo**







### **Accident Photo**









CROWN ASIA BUS BUILDER PTE. LTD. (UEN:201023449R)
44 Sungei Kadut Avenue Singapore 729667
Tel: (65) 6469 3319, Fax: (65) 6902 6758
GST ID No: 201023449R

		Repair Esti	mate	N	o. :	QT-000025	
CHI	NA TA	AIPING INSURANCE (SINGAPORE) PTE LTD	$\neg$	Your Ref.	:		
C/C	LKK	AUTO CONSULTANTS PTE LTD		Our D/O N	Vo. :		
40		10 10 001100111111111111111111111111111		Terms	1	C.O.D.	
				Date	:	24-01-2019	
TEL	:	FAX:		Page	:	1 of 2	
Item	Tax Code	Description	Qty	UOM	U/ I	Price Disc.	Total S\$
	OS	THIRD PARTY CLAIM - REPAIR ESTIMATE FOR PC595U				33	35
		Traffic accident on 24/12/2018 involving PC 595 U and YL 3072M at Forth Chin Bee Road (Heavy Vehicle Carpark)					
		Parts Required:					
1.	05	REAR RIGHT BOTTOM BUMPER	1.00		1,50	0.00	1,500.00
2.	OS	REAR RIGHT BUMPER STRUCTURAL FRAME ASSY	1.00		1,00	0.00	1,000.00
3.	OS	REAR RIGHT LID COVER ASSY LH - Rent LH - H - H			2,65	0.00 776º T.	5,300.00
4.	OS	LESS: 10% TRADE DISCOUNT	1.00		-78	0.00	-780.00
5.	OS	LABOUR CHARGES	1.00		2,45	0.00	2,450.00
		- TO SPRAY FOAM, KNOCK AND REPAIR ALL NECESSARY PARTS INCLUDING CHANGING OF ALL DAMAGED PARTS					1000
6.	OS	LABOUR CHARGES	1.00		2,80	0.00	2,800.00
		TO PUTTY AND SPRAY PAINTING FOR REAR BUMPER, REAR STRUCTURE ASSY AND TWO REAR RIGHT LID COVER, RIGHT BODY STRUCTURE					2,800.00 1 KW
		NOTE: THIS ESTIMATE IS BASED ON VISIBLE DAMAGE ONLY. SHOULD ANY HIDDEN PARTS AND/OR LABOUR CHARGES REQUIRED DURING WORKS IN PROGRESS. IT WILL BE NOTIFED ACCORDINGLY.					
		PRICE QUOTED IS SUBJECT TO 7% GST.					



## CROWN ASIA BUS BUILDER PTE. LTD. (UEN:201023449R)

44 Sungei Kadut Avenue Singapore 729667 Tel: (65) 6469 3319, Fax: (65) 6902 6758 GST ID No: 201023449R

		Repair E	stimate	No	. :	QT-000025	
CI	- HINA TAIPING INSURANCE (	SINGAPORE) PTE LTD		Your Ref.	;		
C	O LKK AUTO CONSULTANTS	5 PTE LTD		Our D/O No	o. :		
				Terms	:	C.O.D.	
				Date	:	24-01-2019	
TI	EL:	FAX:		Page	÷	2 of 2	
Item	-27(15)	Description	Qty	UOM	U/	Price Disc.	Total
	Code			A DE		S\$	S\$
	LHCCAulo Consultante		Ap 90010				
	The Repairer of the following at the second of the second	iowing: cray painting if during resurvey continuation "Without Projudice" bears a allowed	PIP	y' 19 @ 11 11 5 by p	o culd	t	

SINGAPORE DOLLAR TWELVE THOUSAND TWO HUNDRED SEVENTY	Sub Tatal /Fushedian Ci
ONLY	Sub Total (Excluding G

Sub Total (Excluding GST) 12,270.00

GST payable @ 7% on 0.00 0.00

Total (Inclusive of GST) 12,270.00

B.T. industrial

 All cheques should be crossed and made payable to CROWN ASIA BUS BUILDER PTE, LTD.

 Goods sold are neither returnable nor refundable. Otherwise a cancellation fee of 20% on purchase price will be imposed. **GST Summary** 

Amount(S\$)

Tax(S\$)

# ...CLAIM SUBFOLDER...(Pending for Survey Report)

	OLDER TRA	and the second second	Paramator Programma	Pronowers	En ac	and the second	Terrora construe	Status	
	Notified 10 Jan 2019	Est Submitted	Adj Assigned 10 Jan 2019 11:53	Adj Rpt S\$4,785.00 Edit Estimates	5\$4	5,785.00 ew Rot	Ins Auth'ed	Pending for Surv Report	
			Edit Adj Rpt	COIL COLITIBATES		em right		Cancel Ca	se:
- 1	Main	R	eference	Claim	Details		Documents		Show All
CLAIM SU	BFOLDER DE	TAILS				[Created	by insurer]		
Insured:	0, Co. Re	eg. No.: 0							
Main Claimant:	UNKNOW	N, Co. Reg. No.	: NIL						
Vehicle Reg No.:	PC595U	PC595U					8 00:00 - :59 s and <b>2</b> Days Fron	LTA Reg Date	(Man Yr)]
Claim Type:	TP / SNI	TP / SNM19D200119				DMCV5N1764201801			
Vehicle Reg. No. (Insured):		YL3072M			y No. mant):	DMCVSN1764201801			
				Exce		S\$1.00			
Repairer:	Crown As	ia Bus Builder P	te Ltd (sungel Ka	dut) (HQ) 44 Sur	igei Kadı	ut Ave, 7296	67 Sungel Kadut -	Tel:	
Handling Insurer:	China Tai	ping Insurance	(Singapore) Pte. I	.td. (HQ) - Tel: 6	389 611	1 [Handle	d by Catherine T	hia)	
Claimant's Insurer:	7.00010-20-22	**************************************	(Singapore) Pte. I	The state of the s	III Para Name of	(-1			N Maria Maria
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel: 62	256-3561 [Han	died by	MOHD RASU	L] [Final Rp	t due 21/01/	2019]
ASSOCIAT	ED MAIL RE	CEIVED	11000				Vie	w All Comp	ose Case Ma
There are n	o mail for this	case.							
ALL ASSO	CIATED TAS	sks⊟				View All   1	Search Tasks C	reate New Task	Complet
Due Date	Priority	Type Tasi	Group Subje	ct Handler		ned By	Completed On	Created	

### Claim Documents

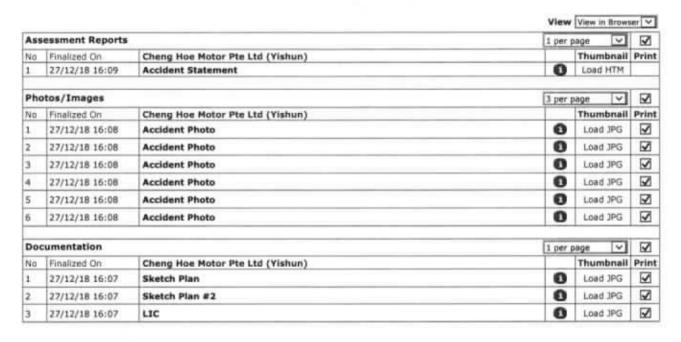
\*PC595U (SNM19D200119) [YL3072M] TP UNKNOWN Dec 24 2018 12:00AM [0]

[0] Crown Asia Bus Builder Pte Ltd (sungei Kadut)

		3 per page	
io Relabel/Re	order LKK Auto Consultants Pte Ltd (HQ)	Thumbna	il Print
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7 08/07/19 14	16 General View	■ Load 3PG	12
8 08/07/19 14	16 General View	1 Load JPG	V
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3 08/07/19 14	16 General View	Load JPG	<b>□</b>
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5 08/07/19 14	16 General View	1 Load JPG	V
6 08/07/19 14	16 General View	1 Load JPG	V
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Pho	otos/Images		3 per i	page V	<b>V</b>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
38	08/07/19 14:16	General View	0	Load JPG	V
39	08/07/19 14:16	General View	0	Load JPG	V
40	08/07/19 14:16	General View	0	Load JPG	V
41	08/07/19 14:16	General View	0	Load 3PG	V
42	08/07/19 14:16	General View	0	Load JPG	Ø
43	08/07/19 14:15	General View	0	Load JPG	V
44	08/07/19 14:16	General View	0	Load JPG	<b>V</b>
45	08/07/19 14:16	General View	0	Load JPG	2
46	08/07/19 14:16	General View	0	Load JPG	120
47	08/07/19 14:16	General View	0	Load JPG	V
48	08/07/19 14:16	General View	0	Load JPG	V
49	08/07/19 14:16	General View	0	Load JPG	V
50	08/07/19 14:16	General View	0	Load JPG	V

### **Linked Accident Report Documents**



### **Documents Checklist**

DOCUMENTS CHECKLIST	Reset Save Print
There are no document checklists configured.	
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)	
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Show Remarks To: Handling Insurer Note: Remarks are private unless you show it to other parties.	

### LKK Auto Consultants Pte Ltd (Co. Reg. No. 199607 198R)

51 Ubi Ave 1 #01-25, Pava Ubi Industrial Park

Singapore 408933

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

### VEHICLE DAMAGE INSPECTION REPORT

Our File No:

CS/CTI19000624/R1SD3E2

Date:

16/07/2019

REFERENCE

Handling Insurer:

China Taiping Insurance (Singapore) Pte. Ltd.

Policy No:

DMCVSN1764201801

Claimant Vehicle

PC595U

Insured Vehicle No:

YL3072M

Date of Loss:

No:

24/12/2018

Nature of Claim: TP Claim No:

SNM19D200119

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:

PC595U

Make & Model:

ISUZU LT434P 7.8 SMT, 7.8 D (M)

Engine No:

6HK1674648

Reg. Date:

22/04/2016 (Man. Year: 2015)

Chassis No: Odometer:

JALLT434PF7000150 244449 km

Colour: Engine Capacity: Multi-colour

7790 cc

Market Value/New Car Price: N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Yes Engine Modification:

Yes Footbrake (Serviceable):

Pre-accident Condition:

Yes

Handbrake (Serviceable): CONDITION OF TYRES

Front Tyre Size:

11R22.5

Rear Tyre Size:

No

11R22.5 (D)

Front Left Side:

TAITONG 8 mm

Rear Left Side:

TAITONG 8/8 mm

Front Right Side:

TAITONG 8 mm

Rear Right Side:

TAITONG 8/8 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	3	Repairer's	Adjuster's	Difference	Diff %
Parts		7,020.00	2,385.00	4,635.00	66.03
Miscellaneous Items	3	0.00	0.00	0.00	
Labour		5,250.00	2,400.00	2,850.00	54.29
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Gross Total (S\$)	12,270.00	4,785.00	7,485.00	61.00
	+ GST 7.00/7.00% (S\$)	858.90	334.95	523.95	61.00
	Nett Amount (S\$)	13,128.90	5,119.95	8,008.95	61.00

INSPECTION

Date of Assignment:

10/01/2019

Date Inspected:

24/01/2019 inspected At:

Crown Asia Bus Builder Pte Ltd (sungei

Kadut) (HQ)

44 Sungei Kadut Ave Singapore 729667

Estimated Period of Repair:

7.0 days

Adjuster: MOHD RASUL

Manager: Hiew May Fung

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 REPAIRS.

(REPAIR COST NOT CONCLUDE) (EXCLUDE CHECK ITEMS \$\$2,385.00 NETT)

## REPAIR DETAILS

Referen		(Last Synchronised: 16 Jul 2019)	
Parts:	N/A	ISUZU LT434P 7.8 SMT 7.8 D (M) (Model not available in database)	
Labour:	Repairer's	(Price-denominated Standard List)	
Print Code:	(Unsubmitted, no print-code for PC595U)		
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page		
Further Info	: Items/values r	ot in reference catalogue are prefixed with an asterisk *.	

## Recommended Parts

No.	Qty	Part No. Particulars	Condition	Repairer's	Amount
1	1	*REAR RIGHT BOTTOM BUMPER	Not Necessary	1,500.00 FL	*-FL
2	1	*REAR RIGHT BUMPER STRUCTURAL FRAME ASS	Y Not Necessary	1,000.00 FL	*-FL
3	1	*REAR RIGHT LID COVER ASSY	O/s Bent/N/s *Check	5,300.00 FL	*2,650.00 FL
F=Fra	inchisa	part. L=ListItemDisc.			
			Sub Total (S\$)	7,800.00	2,650.00
		- List Item Discount on L Ite	ems 10.00/10.00% (S\$)	780.00	265.00
			Total Parts (S\$)	7,020.00	2,385.00

Report was unsubmitted during this print-out.

# Recommended Miscellaneous Items

There are no new miscellaneous items selected.

## Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
Lab	our Items			
1	TO PUTTY AND SPRAY PAINTING FOR REAR BUMPER, REAR STRUCTURE ASSY AND TWO REAR RIGHT LID COVER, RIGHT BODY STRUCTURE	New	2,800.00	1,400.00
2	TO SPRAY FOAM, KNOCK AND REPAIR ALL NECESSARY PARTS INCLUDING CHANGING OF ALL DAMAGED PARTS	New	2,450.00	1,000.00
	Gross Labour	Cost (S\$)	5,250.00	2,400.00
	Report was unsubmitted during	his print-out.	50.500000000000000000000000000000000000	

< END OF ESTIMATES >