INS. CASE OWNER	Stam CC 4 AXA1900	0685 K	John LKK	
Surveyor:	CCC DOI: ASSIGN	MENT I	Date / Time :	Illin.
Pre-assign / CCU	4N 8148	Claim No. :	Registered in Merimen:	~(92428
Name of Insured	emona exports VII	Policy No. ;		
Insured Tel No.  Excess Sec II :SS		Make / Model : Place of Acciden		
Is driver the owner If NO. Driver Na Driver Tel	me / Age :	OI GIA REPORT	F: YES / NO : TP GIA RE	PORT: YES / NO Yes / No
GEH 615				
INSES: Uty WSP: Uty Tel: Limbility: WV RMKS:	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP; Tel: Liability; RMKS:	T I	SRS: SP: el: ability: MKS:
Date/ Time	apmonts-x YN849].	2042	STAGE	DATE/PIC
relition .	& count dam.	2	Non-Reporting ltr (1st):  Non-Reporting ltr (2nd):  Non-Reporting ltr (Final):  Notification ltr (if non-pickup)  Call OI:	19 101
	OINE . LEW OM LET LETTE	٤. ا	After call ltr to Ol:	Handler Typist
	SPOKEN TO LAKSAMI O	)/C.	Notification ltr (if non-pickup) After call ltr to OI: Authorisation To Act	
18-4-19	OF HIT LARKED TP.		Release Voucher: Final Repair Bill: Car Rental Invoice: Towing Invoice	
15-6-19	WHATSAP POI FOR L	UA.	LTA / GIA : Medical Bill: PIR:	
			Mandate/Reject Instruction LOD Payment Breakdown Form:	
PRELIMINARY ADVICE	E Date/Time: Sent By:		Post-Repair Photos: Others:	
FINALIZATION Repair Cost:	Date/Time: Confirm with:  SS days) Reduction:	%	Confirm by: Email	Call
FINAL SETTLEMENT Final Liability Repair Cost: (5)	Date/Time: 25 / Grant Mith Will St. (Agrical / Assessed) BOLA S/N No. : SS 3 959	N/ L	Email Cal If NO or B 28, Ass. Lia	
Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI):	SS		ACKED IV.	1414
LOR only LOU only GIA/LTA Search Medical:	SS 2. ∠ ↓ SS -		1) Claim status: Normal/Re	ject/Private Settle
Disbursement: Legal Cost Total:	SS - (e.g. Tow/ Independence SS 4,561-00 Global Sum SS:		2) Report Format: 3) Survey fee:	
FINAL PAYMENT Payee 1:	Date/Time: Confirm with: ss 4,561.00 Name 1: City &	JP 975	Email Cal	
Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.)	SS			



# 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

AVA	INSURANCE PTI	ELTD	Ref : CC4/ASM1900	00685/ib3
AAA	NINSURANCE PII	ELIU	Rei : CC4/ASWI1900	J0003/JD3
	HENTON WAY #24 TOWERSINGAP		Date: 11-01-2019 Code: ASM	
1.		Policy Partic	ulars :- THIRD PARTY CLA	IM
	Insured Veh.	YN 8238J	Veh. Inspected	GBH 6151S
	Policy No.		Coverage (\$)	0.00
4	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	11/01/2019
2.		Vehicle	Particulars & Condition	
	Make & Model		c.c	0
	Engine No.	HIDDEN	Year of Reg.	
	Chassis No.		Colour	
	Odometer	-	Steering	
	Brakes		Modification	
	General			
3.		Co	onditions 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.		Des	cription of Damages	
5.		0.	eneral Information	
J.	Accident Date	09/01/2019	Inspection Date	
	Survey held at	CITY AUTO PTE LTD	mspection Date	
	ourvey new at	BLK 8, SIN MING IND. ES #01-60/62 SIN MING ROAD SINGAPORE 575643.	STATE	
5a.			Remarks	





NO. 8

# CITY AUTO PTE LTD

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643 TEL: 6453 1235, 6452 0850 FAX: 6453 7944

24hrs Towing Services Tel: 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

AXA INSURANCE SINGAPORE PTE LTD

Estimate : QUOT201901-000186(00)

Date: 10/01/2019

Vehicle No.: GBH6151S Make/Model: TOYOTA DYNA

SHENTON WAY AXA TOWER SINGAPORE 068811

Attention: Elite Fine Food LLP

Contact: 82689822

Mileage (km): 0 Fax No.: 6880 4838

Chassis No.: JTFAT35Y60K210240 Accident Date: 09/01/2019 00:00:00

Claim No.: YN8238J Reference : GBH6151S Policy No.: B29090975MKC

Not Arthanke Resonry Blopains

S/No Particular Quantity Unit Price Amount S\$ LIST ITEMS : Front panel 1.0 1,239.70 1,239.70 2 Emblem - Dyna 1.0 56.70 56.70 3 Front grille 1.0 601.70 601.70 Front grille logo 1.0 75.30 M 75.30 5 Front grille clip 6.0 4.39 26.34 6 LH headlamp 1.0 703.70 703.70 X LH wing mirror stay 7 1.0 422.60 422.60 L

8 LH wing mirror motor 1.0 697.33 697:33 9 Air cond evapurator unit assy (twscM 2,116.70 1.0 2,116.70 Air cond-blower motor assy-1.0 816.70 816.70 \$ List Total: 6,756.77

25% Discount S\$ 1.689.15 5 Days 5,067.62 -8 LABOUR: \*To supply panel sealant and seal all seams and gaps 90.00 3-1 30 10 90.00 \*To check wiring and lighting

40.00 Zd 25 \*To remove and install air cond component and recharge air cond 1.0 250.00 250.00 1001 \*To remove and refit dashboard unit 1.0 250.00 250.00 224 -To knock jackout damaged parts, panel beating, welding, align, 700.00 550 1.0 700.00 refix and to renew accident parts - Spray painting on affected & replace parts 1.0 400.00 30d 400.00

1.0

1,730.00 1,220

475.83

7,273.45

40.00

E. & O.E. Total S\$: 6,797.62 58 4539-04 GST 7% S\$: × 258 Amount Due SS: 36 31-23 1220.00

4,851-25 Page 1 of 1

3880-99



# CITY AUTO PTE LTD

One Stop Automotive Solution

BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643

TEL: 6453 1235, 6452 0850 FAX: 6453 7944 24hrs Towing Services Tel: 9823 9898

Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Estimate : QUOT201901-000186(00)

AXA INSURANCE SINGAPORE PTE LTD

SHENTON WAY AXA TOWER

SINGAPORE 068811

Attention: Elite Fine Food LLP

Contact: 82689822

Fax No.: 6880 4838

Mileage (km): 0

Chassis No.: JTFAT35Y60K210240 Accident Date: 09/01/2019 00:00:00

Date: 10/01/2019 Vehicle No.: GBH6151S

Make/Model: TOYOTA DYNA

Claim No.: YN8238J Reference: GBH6151S Policy No.: B29090975MKC

Not Asthanke Resonary BG paint

S/No	Particular	5day	Quantity	Unit Price	Α	Amount S\$	
01	LIST ITEMS:		000000	2291235223	B		A (S) /
1	Front panel		1.0	1,239.70	100	1,239.70	
2	Emblem - Dyna		1.0	56.70	M	56.70	
3	Front grille		1.0	601.70	ner		3 4
4	Front grille logo		1.0	75.30	M		0 50 02
5	Front grille clip		6.0	4.39	M		
6	LH headlamp		1.0	703.70	~	703.70	
7	LH wing mirror stay		1.0	422.60	12,		
8	LH wing mirror motor		1.0	697.33	Sen	697.33	X
9	Air cond evapurator unit assy		1.0	2,116.70		2,116.70	?
10	Air cond blower motor assy		1.0	816.70		816.70	7
	List Total					6,756.77	
	25% Discount S\$					1,689.15	i.
					AT .	5,067.62	2
	LABOUR:						2
	*To supply panel sealant and seal all seams and gaps		1.0	90.00		90.00	
	*To check wiring and lighting		1.0	40.00		40.00	
	*To remove and install air cond component and recharge air cogas	and	1.0	250.00		250.00	100
	*To remove and refit dashboard unit		1.0	250.00		250.00	
	<ul> <li>To knock jackout damaged parts, panel beating, welding, align, refix and to renew accident parts</li> </ul>	Ê	1.0	700.00		700.00	
	- Spray painting on affected & replace parts		1.0	400.00	100	400.00	30
						1,730.00	1

LKK Auto Consultants hence notify the Repairer of the following:		Total S\$:	6,797.62
- To resurvey before/after spray painting		7% S\$:	475.83
To display damaged part(s) during resurvey	Amount	Due S\$	7,273.45

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

Page 1 of 1

for CITY AUTO PTE LTD

10017019 @ 5.13pm Vranica Veh notin Menu



# Service Request Details

Claim

S9M01A0M

Reference

None Ø

Loss Date

9 January 2019

Request Date

10 January 2019

Due Date

17 January 2019

Vendor Name

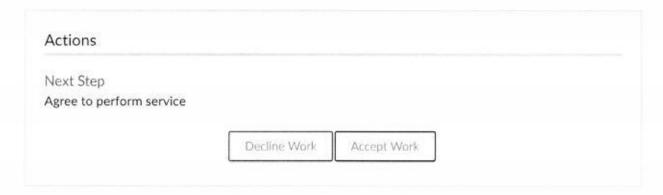
LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Incident Only

Services

Pending verification - Direct Settlement



### Vehicle Information

Incident Vehicle Registration #

GBH6151S

Make

TPVD TOYOTA

LKK AUTO CONSULTANTS PTE LTD (TP) +

Menu

Service Address

...

Primary Contact/Insured

RADHA EXPORTS PTE. LTD. 40 PANDAN ROAD, 609282, Singapore 94525597 HONGYEN.CHONG@ALLINK.COM.SG

Claim Handler

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

Additional Instructions

NON REPORTED

Messages Invoices History Documents Assessment Metrics Notes

New Message

# Catherine Chong (LKK Auto)

From:

City Auto <cityauto@singnet.com.sg>

Sent:

Thursday, 10 January, 2019 3:50 PM

To:

SG AXA Insurance SM AXA SGP - Motor Survey

Subject:

Arrange survey on GBH6151S GIA report.pdf; Estimate.pdf

Categories:

Attachments:

Pragati

Hi Arrangement survey dept,

Kindly arrange LKK Auto Consultants Pte Ltd survey on following vehicle:

TP Survey

Your vehicle: YN8238J

Our vehicle: GBH6151S

D.O.A

: 09/01/2019

LOCATION : Blk 160, Sin Ming Drive, Sin Ming Auto City #05-01 Singapore 575722

Thank you.

### Best Regards,

### Vronica Law

City Auto Pte Ltd Blk 8 Sin Ming Industrial Estate, #01-60/62 Sin Ming Road, Singapore 575643

Tel : 6453 1235 Fax : 6453 7944



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

14 January, 2019

RADHA EXPORTS PTE. LTD. 40 PANDAN ROAD, Singapore 609282

Dear Sir,

OUR REF

: CC4/ASM19000685/jb3

YOUR REF

: YN 8238J

ACCIDENT INVOLVING YN 8238J & GBH 6151S ON 09/01/2019 ALONG/AT BUKIT PANJANG PLAZA LOADING BAY B1

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

We refer to the above subject matter. We have received third party claim(s) against your motor insurance policy.

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

We highlight that this accident has not been reported to your insurer. Under the Motor Claims Framework (MCF), you are required to report any accident with the accident vehicle (whether damaged or not) within 24 hours or by the next working day after the accident. The primary purpose of this reporting is to provide your version of the accident to AXA. Omission to report the accident will result in a loss of your No Claim Discount (NCD) upon renewal of your policy, and will prejudice any claim(s) by or against you. We would appreciate it if you could urgently file a report at our approved reporting centre.

The report has to be lodged at any of AXA Premium Workshops or reporting centres (subject to your policy). For the list of AXA Premium Workshops conveniently located throughout Singapore, please refer to the back of your Certificate of Insurance or the accompanying folder, or visit <a href="https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting">https://www.axa.com.sg/customer-care/personal/motor/owndamageaccidentreporting</a>.

Your full co-operation is required. Kindly submit the following when lodging the report which list 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 us immediately. You may email it to joyirene@lkkauto.com or deliver it by hand to 51 Ubi Avenue 1, #01-25 Paya Ubi Ind. Park S(408933).

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition, your insurer shall have full discretion in the process and settlement of the said third party claim subject to the merits of the case and according to the rights afforded under the policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, your insurer reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact us at 6841 2409 if you have any further enquiries.

Yours sincerely, Claim Department

This is a computer generated letter and no signature is required.

CC : AXA INSURANCE PTE LTD Motor Claim Department

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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

- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

MALE CONTRACTOR OF THE PARTY OF	ACCIDENT STATEMENT	
Date Of Report	10/01/2019 16:11	1000
Date Of Accident	09/01/2019 14:45	010
Exact Location Of Accident	BUKIT PANJANG PLAZA CARPARK	Lakshmi @
Country/State of Loss	SINGAPORE	Win
C C	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	YN8238J	
Insured/Policyholder	Con	Cotri
Name Of Registered Owner	RADHA EXPORTS PTE LTD	
Co Reg No	199500018C	
Email Address	NOEMAIL	1 20
Mobile Phone No		far 22/
Alternative Phone No	OFFICE-62202777	1//
Vehicle Particulars		26
Manufacturer	MITSUBISHI	C V
Model	CANTER FEB71ER4SDEC	20
Exact Purpose for which vehicle was being used at time of accident		6264 38XX
Are you claiming under your own insurance policy for repair to your vehicle?	NO	radin gansar
If No, Please state action to be taken	REPORTING ONLY	9 41
Vehicle Category	COMMERCIAL VEHICLE	25
Insurance Company		(0,0)
Name of Insurance Company	AXA INSURANCE PTE LTD	( n . )
Type Of Coverage	COMPREHENSIVE	- chui
Fleet Policy	NO	2
Policy Number	GA429014/1	(5)
Cover Note Number		
Driver		
Name of Driver	NG SOON BENG	
Passport No/FIN	F7372111M	

 Name of Driver
 NG SOON BENCE

 Passport No/FIN
 F7372111M

 Date Of Birth
 15/01/1973

 Occupation
 INDOOR

 Date Of Driving Pass
 28/06/2006

Driving Experience 12 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90530575

Fax Number Contact Number

EMail Address NOEMAIL

Address

BLK E 03-06

JALAN BARLI 1 BANDAR BARU UDA JOHOR BAHRU

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

COLLIDED INTO PARKED VEHICLE

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? Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

YES

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

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

GBH6151S

Vehicle Make/Model/Colour

**Details Of Properties** 

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### Sketch Plan Pg. 1

### SKETCH PLAN

### IMPORTANT NOTICE

- Please report <u>correctly</u> 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
- 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
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (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

Reporting Centre Personnel's Signature

NRIC/FIN No.:

### Sketch Plan Pg. 2

SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT LICENSE PLATE: YM &2 38 J ACCIDENT DATE & TIME: 09 | 01 19 14 45 hrs CONTACT NUMBER: 90 5 30 5 75 /6220 2777 E-MAIL ADDRESS: LOCATION: Bukit Panjang Plaza carpark While I was trying to reverse my uch (YN82387) from carpart let there was a vehicle enddowly stop infront of my veh due to it im not able to stop and knock on his front bumper. After I felt an impact, went down and check my veh and lins veh. We both took some preture. There was some minor damaged on the veh B and my veh no damaged. Then we both move from the accident place. NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION Please state: ( ) Claim OD/TP at other workshop Reporting Only ( ) Claim Third Party ( ) Claim Own Policy DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Driver's signature Reporting Centre Personnel's Signature Date & Fime:

(If driver is not the policyholder)

Date & Time:

NRIC/FIN No.:

Menu



# Re:MANDATE IA- GBH 6151S - CITY AUTO

Type

**Q** Question

Message

Please proceed

Reply

Date: 15/01/2019



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

# **Immediate Advice**

To: AXA Insurance Pte Ltd

## **Survey Details:**

Date of loss	9-Jan-19
Date of appointment	11-Jan-19
Date of survey	14-Jan-19
Location of survey	CITY AUTO PTE LTD

# Vehicle Details:

Claim Type:	Third party
Vehicle number	GBH 6151S
Make and Model	TOYOTA DYNA 150 5MT
Date of registration	26/7/2018
Excess	7557
Market Value	\$67,000
Parf Rebate	\$29,620
Nett Loss	\$37,380

# Repair details:

<	6,797.62
	S

### Proposed/Revised repair cost:

Parts	\$	3,404.28
Check items (estimate)	7601	
Labour	\$	1,220.00
Total	\$	4,624.28
Lump Sum(if applicable)	\$	3,700.00

Number of days for repair	5 DAYS



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

## Remarks:

Ve have not authorized repairs. INSURED HIT PARKED TP	

# Mandate:

Liability(TP)	100%	
Proposed repair cost	\$ 3,959.00	GST
Loss of use	\$ 600.00	\$100 x 6
LTA search fees	\$ 2.00	
Proposed Total	\$ 4,561.00	

# CITY AUTO PTE LTD

One Step Automotive Solution
BLK 8, SIN MING IND. ESTATE, #01-60/62, SIN MING ROAD, SINGAPORE 575643 TEL: 6453 1235, 6452 0850 FAX: 6453 7944 24hrs Towing Services Tel: 9823 9898 Co. Reg. No.: 199503435C GST Reg. No.: M2-8920979-4

Your ref: CC4/ASM19000685/Kjb3 Our ref: JO201901-0262

WITHOUT PREJUDICE

24/04/2019

Attn: Motor Claim Dept

AXA INSURANCE SINGAPORE PTE LTD NO. 8 SHENTON WAY AXA TOWER SINGAPORE 068811

Dear Sir/Mdm.

### Accident involving GBH6151S and YN8238J on 09/01/2019

We refer to the above said accident.

We enclosed here with relevant documents as stated below:-

- Repair tax invoice
- Letter of authorization
- GIA search receipt

As instructed, we are claiming the following as stated below:-

Cost of Repair	4	S\$	3,959.00
Loss of use (6 Days x \$100.00)	1	S\$	600.00
LTA Search Fee	1	S\$	2.00
		S\$	4,561.00

We do not have the survey report and photographs as our client's motor vehicle was surveyed by your appointed surveyor.

Please kindly let us know whether you are prepared to settle our client's claim & we look forward to hear from you soonest.

Thanks & regards

Vronica Law (Claim dept.)

Tel: 6453 1235 Fax: 64537944

Email: cityauto@singnet.com.sg

# THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	YN 8238J (Insd veh)		Model:	TOYOTA DYNA	
	GBH 6151S (TP veh)		7		
Date of Accident:	09/01/2019				
Global Sum Settlen	nent : [ ] Yes		[X] No		
Repair Estimate		: \$	7,273.41		
inal Repair Cost		: \$	3,959.00		
oss of Use		: \$	600.00	6 days at \$100.00 per day	
Rental (if any)		: \$		days	
LTA / GIA Search F	ee	: \$	2.00		
Others:		: S			
		: \$			
Final Settlement Su	ım	: \$	4,561.00		
elow)	kshop GIA Registere		[ ] YES [X		
A) For Non GIA N	Registered Workshop:		Agreed Liability _		
B) For GIA Regis	tered Workshop:		BOLA Applicable:	Yes/ No BOLA Scenario No:	
BOLA Liability:	(%)		Assessed Liability	· (*):(%)	
* Assessed Lia	bility to be filled only fo	r chain	collisions and for cas	ses where BOLA does not apply.	
Remarks					
<u> </u>					
-					
Payment Instruction	on: Payee's Breakdov	vn			
1) CITY AUTO P	TE LTD		: \$	4,561.0	
	ILAH BTE ABDOL VAHAB		28/06/2019		
SF			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 Interes	nationale Des Experts En Autom	nobile	
AXA INSURANCE PTE LTD		Ref : CC4/ASM1900	Ref : CC4/ASM19000685/Kjb3s2		
	ENTON WAY #24 COWERSINGAPO		Date: 28-06-2019		
ATTN: STACEY NG		Code: ASM			
1.		Policy Particul	ars :- THIRD PARTY CLAI		
	Insured Veh.	YN 8238J	Veh. Inspected	GBH 6151S	
	Policy No.	GA429014/1	Coverage (\$)	0.00	
	Claim No.	S9M01A0M	Excess (\$)	0.00	
	Assign From	STACEY NG	Assign Date	11/01/2019	
2.		Vehicle P	articulars & Condition		
	Make & Model	TOYOTA DYNA	c.c	2982	
	Engine No.	HIDDEN	Year of Reg.	2018	
	Chassis No.	JTFAT35Y60K210240	Colour	WHITE	
	Odometer	11691	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	NIL	
	General	GOOD			
3.	STURBARD WENT	Cor	nditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	195/75 R15	BRIDGESTONE	9 mm	
	L/H Front Tyre	195/75 R15	BRIDGESTONE	9 mm	
	R/H Rear Tyre	155 R12X8 (D)	BRIDGESTONE	9/9 mm	
	L/H Rear Tyre	155 R12X8 (D)	BRIDGESTONE	9/9 mm	
4.		Desci	ription of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE	FRONT PORTION.		
	DAMAGES SEE D	ETAILS.			
5.		Ger	neral Information		
	Accident Date	09/01/2019	Inspection Date	14/01/2019	
	Survey held at	BLK 160 SIN MING DRIVE	#05-01 SINGAPORE 575722		
	Repairer	CITY AUTO PTE LTD			
5a.			Remarks		
			"WITHOUT PREJUDICE" BAS S, WE HAVE NOT AUTHORIS		
5b.	State of the state of	Estim	nate Days of Repair		

5 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



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### ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GBH 6151S

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			\
1	FRONT PANEL (CONSISTENT)	BENT	1,239.70	1,239.70
1	EMBLEM - DYNA (CONSISTENT)	NECESSARY	56.70	56.70
1	FRONT GRILLE (CONSISTENT)	DENTED	601.70	601.70
1	FRONT GRILLE LOGO (CONSISTENT)	NECESSARY	75.30	75.30
6	FRONT GRILLE CLIP (CONSISTENT)	NECESSARY	26.34	26.34
1	LH HEADLAMP (CONSISTENT)	SERVICEABLE	703.70	-
1	LH WING MIRROR STAY (CONSISTENT)	BENT	422.60	422.60
1	LH WING MIRROR MOTOR (CONSISTENT)	SERVICEABLE	697.33	
1	AIR COND EVAPURATOR UNIT ASSY (CONSISTENT)	HOUSING CRACKED	2,116.70	2,116.70
1	AIR COND BLOWER MOTOR ASSY (CONSISTENT)	SERVICEABLE	816.70	
	LESS 25% DISCOUNT		-1,689.19	-1,134.76
	and the state of t		5,067.58	3,404.28
	LABOUR			
	TO SUPPLY PANEL SEALANT AND SEAL ALL SEAMS AND GAPS.		90.00	30.00
	TO CHECK WIRING AND LIGHTING.		40.00	20.00
	TO REMOVE AND INSTALL AIR COND COMPONENT AND RECHARGE AIR COND GAS.		250.00	100.00
	TO REMOVE AND REFIT DASHBOARD UNIT.		250.00	220.00
	TO KNOCK JACK DAMAGED PARTS, PANEL BEATING, WELDING, ALIGN, REFIX AND TO RENEW ACCIDENT PARTS.		700.00	550.00
	SPRAY PAINTING ON AFFECTED & REPLACE PARTS.		400.00	300.00
			1,730.00	1,220.00
	GRAND TOTAL		6,797.58	4,624.28

RECOMMENDED COST OF LUMP SUM REPAIRS	3,700.00
(TO ITS PRE-ACCIDENT CONDITION)	Service Survey

Report Ref No. CC4/ASM19000685/Kjb3s2

KONG SENG CHEONG

Licensed Appraiser

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.

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