

22/03/2002

ASS. REC. BY:

REF:

CS/MSG19000951/Kqd322

Special Instruction:

Surveyor:

Kenneth

ASSIGNMENT (Office)

From (Person):

Jowyn Tay

of

MSG

Date/Time:

16/1/19 @ 10:47am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLK 4027Y

Insured:

SFW/1611M

at Workshop m/s

Optima Werkz

Tel:

6481 1522

of

9A Serangoon North Ave 5

Policy No:

27920544

Claim No:

582122

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

12/01/19

CA / REV / REP. / REV 24 HRS

'up

H.O.D. Endorsement:

Date/Time:

11:03am @ 16/1/19

Person Contacted:

gheron

Vehicle

IN/OUT

Date/Time

Action/Instruction

(✓)

Estimate

SLK 4027Y-X.

SFW/1611M-CS/TP10007731/Uckl

DOA: 10/1/2010

17/1/19 @ 5:10pm revised to Jowyn Tay via Meimen.

21/1

81087.44 Cash (Ref to 730, 40%)

ASS. REC. BY:

REF: MSG /

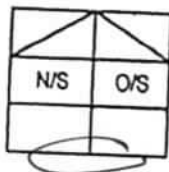
Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s Optima  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 1.3.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SLK 40277 Yr Regn: 01.1.7  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Traller or

Make: Toy Aqua c.c. 1498

Colour: N.P. White A/C: Insured / Std / NI / NA

Sp. Reading: 136809 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: NHP10 8538586

Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModl: NH / S/Rlm / STD A/Rlm or

Tyre Size: R: Achilles 195/55R15  
R: Dayton

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

Front

R/Bal. 2 mmL/Bal. 2 mmD.O.A. 12/1/19

Survey held at

Rear

R/Bal. 6 mmL/Bal. 6 mmD.O.I. 16/1/19

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

17/1 File pass to Car

RECEIVED 01 MAR 2019

Date/Time, File Pass to?

☐

: Prell. Report

1) 01/3 train
☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2Resurvey No. of Trip: 1

Add Fee:

☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech Invs (\$

☐ : Weekend (\$

Survey Fee:

Transportation:

Fines

Others

TOTAL

Report Format: MER-TPLump Sum / I.B.I: (\$ 1087.44)

150
10
160

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

### CLAIM SUBFOLDER TRACKING

Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	12 Jan 2019		16 Jan 2019 10:47 <a href="#">Assign</a>				<b>New Assignment</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	<a href="#">Show All</a>
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#### CLAIM SUBFOLDER DETAILS [Created by insurer]

Insured:	DHYAN CHANDRA JHA, ID: S6965365J, Tel: +6597585418, Email: NOEMAIL			
Main Claimant:	OPTIMA WERKZ PTE LTD, Co. Reg. No.: 201212455W			
Vehicle Reg. No.:	SLK4027Y	Date of Loss:	12/01/2019 11:00 - :59 [23 Months and 27 Days From LTA Reg Date (Man Yr)]	
Claim Type:	TP / 582122	Policy/Cover Note No.:	27920544 (TP, Fire & Theft) Coverage: 25/06/2018 - 24/06/2019	
Vehicle Reg. No. (Insured):	SFW1611M	Policy No. (Claimant):		
		Excess:		
Repairer:	Optima Werkz Pte Ltd (HQ) 9A Serangoon North Ave 5, 554500 Serangoon - Tel:			
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Jowyn Tay Mei Ling - 6643 1307]			
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 17/01/2019]			
Driver/Custodian (Insured):	DHYAN CHANDRA JHA (49 / Male), NRIC: S6965365J, Tel: +6597585418			
Adj Asg. Remarks:	LIAB IS DOWN. SJE AGREE LKK. PLS CONTACT SHARON TEN @ 6481 1522			

#### ASSOCIATED MAIL RECEIVED [View All](#) [Compose Case Mail](#)

There are no mail for this case.

#### ALL ASSOCIATED TASKS [View All](#) [Search Tasks](#) [Create New Task](#) [Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Note: This document has not been finalised.

**LKK Auto Consultants Pte Ltd** (Co.Reg.No:199607198R)51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park  
Singapore 408933

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

To: MSIG Insurance (Singapore) Pte. Ltd.  
4 Shenton Way  
#21-01 SGX Centre 2  
Singapore 068807From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn: Jowyn Tay Mei Ling

Date: 17 Jan 2019

**Preliminary Advice**

Insured Vehicle No	: SFW1611M	Accident Date	: 12/01/2019
TP Vehicle No	: SLK4027Y	Assignment Date	: 16/01/2019
Make	: TOYOTA AQUA HYBRID	Est. Duration of Repair	: 2.00
Date of Inspection	: 16/01/2019		
Inspection At	: OPTIMA WERKZ PTE LTD (HQ) 9A SERANGOON NORTH AVE 5 SINGAPORE 554500		

**Point of Impact / General Description of Damages**

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$	1,817.44
Revised Amount	:S\$	1,087.44
Check Items (Estimated)	:S\$	0.00
Total	:S\$	1,087.44

Lump Sum Repair	:S\$	
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**Total Loss Consideration**

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

**Remarks**

- ( ) The vehicle is economical/not economical for repair.
- ( X ) The above survey was conducted on a 'without prejudice' basis.

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	2455W
<b>Vehicle Details</b>	
Vehicle No.:	SLK4027Y
Vehicle to be Exported:	Yes
Intended Deregistration Date:	12 Jan 2019
Vehicle Make:	TOYOTA
Vehicle Model:	AQUA HYBRID 1.5S A
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	1NZ8043268
Chassis No.:	NHP106538586
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$20,467.00
Original Registration Date:	16 Jan 2017
First Registration Date:	16 Jan 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Jan 2027
PARF Rebate Amount:	\$3,750.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	15 Jan 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,951.00
COE Rebate Amount:	\$40,760.00
<b>Total Rebate Amount:</b>	<b>\$44,510.00</b>

The information contained herein is correct as at 12 Jan 2019

OK

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

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

ACCIDENT STATEMENT	
Date Of Report	12/01/2019 12:17
Date Of Accident	12/01/2019 11:15
Exact Location Of Accident	PIE TOWARDS CHANGI (BEFORE UPP SERANGOON RD EXIT)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLK4027Y
Insured/Policyholder	
Name Of Registered Owner	OPTIMA WERKZ PTE LTD
Co Reg No	201212455W
Email Address	SHARON@OW.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64849919
Vehicle Particulars	
Manufacturer	TOYOTA
Model	AQUA HYBRID 1.5S A
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD18V07597/VPZ/R01
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD SAIFUDDIN BIN ZULFATTAH
NRIC No	S8925485Z
Date Of Birth	31/07/1989
Occupation	INDOOR
Date Of Driving Pass	07/04/2014
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98324316
Fax Number	
Contact Number	
Email Address	M.SAIFUDDINZULFATTAH@GMAIL.COM

Address	BLK 549 WOODLANDS DRIVE 44 #12-92
Postcode	730549
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : YUSLINDA BTE KHASHMADI GENDER: : FEMALE
Passenger 2	NAME: : SAADIYA BTE MUHD SAIFUDDIN GENDER: : FEMALE

#### 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

On 12/01/2019 @ about 1115hrs, I was travelling along PIE towards Changi direction. Vehicles ahead of me slowed down and come to a stop, I followed suit. After a few seconds, a sudden hard impact from behind. Upon alighting, I realised that it was a chain collision involving of 3 vehicles. Vehicle B (SFW1611M) hit onto rear portion of my vehicle (A: SLK4027Y) and vehicle C (SLP2775H) hit onto rear portion of vehicle B. No injury arising out of this 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	SFW1611M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DHYAN
NRIC/Passport Number	S6965365J
Contact Number	81838344

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLP2775H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

LIM FANG KIM

NRIC/Passport Number

S0137347A

Contact Number

96609696

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



# Sketch Plan Pg. 1

## SKETCH PLAN

Sketch Plan diagram showing a road layout with lanes and vehicles labeled A, B, and C. The diagram includes a title "Sketch Plan" and a description of the accident scene.

PIE towards Changi

A = SLK4027Y  
B = SFW1611M  
C = SLP2775H

Diagram showing lanes and vehicles A, B, and C.

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the statement.

Describe the circumstances of the accident in detail, including the location, time, and any other relevant information.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 12/01/2019 @ 12:15hrs.

Reporting Centre Personnel's Signature  
Name: Shana Tan  
NRIC/FIN No.:

SKETCH PLAN

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 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:

- (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 "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
- (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: 12/01/2019 @ 12:55

Reporting Centre Personnel's Signature  
Name: Sharon Tan  
NRIC/FIN No.:

# OPTIMA WERKZ PTE LTD

Head office : 6 Kung Chong Road Singapore 159143

Tel : +65 6472 1313 Fax : +65 6472 2112

Branch office : 9A Serangoon North Ave 5 Singapore 554500 Tel : +65 6484 9919 Fax : +65 6481 1011

Co. Reg. No. 201212455W

Date: 14 JANUARY 2019

Third Party Insurer: MSIG

Vehicle No: SLK4027Y

Third Party Veh No: SFW1161M

Model: TOYOTA AQUA HYBRID 1.5S

Date of Accident: 12 JANUARY 2019

Chassis: NHP106538586 – 2017

## ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	REAR BUMPER	1		<i>Bu</i> \$408.31
2	REAR BUMPER SIDE BRACKET RH	1		<i>Di</i> \$68.28
3	REAR END PANEL	1		REPAIR
SUB TOTAL				\$476.59
LESS 25%				-\$119.15
PARTS TOTAL				\$357.44

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	REAR BUMPER REVERSE SENSOR RH	1 SET		<i>CRG</i> \$60.00
2	REAR BUMPER CLIPS	1 SET		<i>na</i> \$220.00
S/N TOTAL				\$280.00

### LABOUR CHARGES:

LABOUR CHARGES FOR KNOCKING & PARTS REPLACEMENT & ETC

*2001*  
\$500.00

LABOUR CHARHES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIAL

*2201*  
\$500.00

TO TUFF KOTE / ANTI-RUST

*nn* \$60.00 X

TO REMOVE & REFIX / REPLACE REAR BUMPER REVERSE SENSOR ETC

\$60.00 *501*

TO CEHCK WIRING & ELECTRICAL SYSTEM

*nn* \$60.00 X

LABOUR TOTAL \$1,180.00

ONG TOTAL \$1,817.44

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary part(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

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

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	12 Jan 2019		16 Jan 2019 10:47 <a href="#">Edit Adj Rpt</a>	<b>S\$1,087.44</b> <a href="#">Edit Estimates</a>	<b>S\$1,087.44</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main	Reference	Claim Details	Documents	Show All					
<b>CLAIM SUBFOLDER DETAILS</b> <span style="float: right;">[Created by insurer]</span>									
Insured:	<b>DHYAN CHANDRA JHA</b> , ID: S6965365J, Tel: +6597585418, Email: NOEMAIL								
Main Claimant:	<b>OPTIMA WERKZ PTE LTD</b> , Co. Reg. No.: 201212455W								
Vehicle Reg. No.:	<b>SLK4027Y</b>	Date of Loss:	12/01/2019 11:00 - :59 [23 Months and 27 Days From LTA Reg Date (Man Yr)]						
Claim Type:	<b>TP / 582122</b>	Policy/Cover Note No.:	27920544 (TP, Fire & Theft) Coverage: 25/06/2018 - 24/06/2019						
Vehicle Reg. No. (Insured):	<b>SFW1611M</b>	Policy No. (Claimant):							
		Excess:							
Repairer:	<b>Optima Werkz Pte Ltd (HQ)</b> 9A Serangoon North Ave 5, 554500 Serangoon - Tel:								
Handling Insurer:	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> - Tel: +65 6827 7888 ... [Handled by <b>Jowyn Tay Mei Ling</b> - 6643 1307]								
Adjuster:	<b>LKK Auto Consultants Pte Ltd (HQ)</b> - Tel: 6256-3561 ... [Handled by <b>KENNETH KONG</b> ] ... [Final Rpt due 15/02/2019]								
Driver/Custodian (Insured):	DHYAN CHANDRA JHA (49 / Male) , NRIC: S6965365J, Tel: +6597585418 Email: NOEMAIL								
Adj Asg. Remarks:	LIAB IS DOWN. SJE AGREE LKK. PLS CONTACT SHARON TEN @ 6481 1522								
<b>ASSOCIATED MAIL RECEIVED</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Compose Case Mail</a></span>									
There are no mail for this case.									
<b>ALL ASSOCIATED TASKS</b> <span style="float: right;"><a href="#">View All</a> <a href="#">Search Tasks</a> <a href="#">Create New Task</a> <a href="#">Complete</a></span>									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SLK4027Y (582122)  
[SFW1611M]  
TP  
OPTIMA WERKZ PTE LTD  
Jan 12 2019 11:00AM  
[DHYAN CHANDRA JHA]  
Optima Werkz Pte Ltd

[Upload Documents](#) | [Upload Photos](#) | [Compose New Letter](#)

**View** View In Browser

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail	Print
1	15/01/19 12:31	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> <b>Accident Statement</b> From: SC - Reg. No: SFW1611M, Claimant: DHYAN CHANDRA JHA	1	Load HTM	
1	17/01/19 17:10	<b>LKK Auto Consultants Pte Ltd (HQ)</b> <b>Adjuster Immediate Advice</b>	1	Load HTM	

Photos/Images				3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder			Thumbnail	Print
1	01/03/19 12:00	<b>LKK Auto Consultants Pte Ltd (HQ)</b> <b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
2	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
3	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
4	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
5	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
6	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
7	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
8	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
9	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
10	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
11	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
12	01/03/19 12:00	<b>General View</b>	1	Load JPG	<input checked="" type="checkbox"/>
13	01/03/19 12:00	<b>Odometer Reading</b>	1	Load JPG	<input checked="" type="checkbox"/>
14	01/03/19 12:00	<b>Chassis Number</b>	1	Load JPG	<input checked="" type="checkbox"/>
15	01/03/19 12:00	<b>Reinspection Photo</b>	1	Load JPG	<input checked="" type="checkbox"/>
16	01/03/19 12:00	<b>Reinspection Photo</b>	1	Load JPG	<input checked="" type="checkbox"/>

Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On			Thumbnail	Print
1	15/01/19 12:31	<b>MSIG Insurance (Singapore) Pte. Ltd. (HQ)</b> <b>TP SLK4027Y E-REPORT</b>	1	Load PDF	
2	15/01/19 15:40	<b>SJE AGREE LKK</b>	1	Load PDF	

## Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			
<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>			

**Show Remarks To:** ☐ Handling Insurer  
Note: Remarks are private unless you show it to other parties.

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

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

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

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG19000951/KQD3E2

Date: 04/03/2019

### REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: 27920544

Claimant Vehicle No : SLK4027Y

Insured Vehicle No : SFW1611M

Date of Loss: 12/01/2019

Nature of Claim: TP

Claim No: 582122

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLK4027Y**

Make & Model: TOYOTA AQUA HYBRID, 1.5 E S CVT (A)

Engine No: 1NZ8043268

Reg. Date: 16/01/2017 (Man. Year: 2016)

Chassis No: NHP106538586

Colour: Metallic Pearl White

Odometer: 136809 km

Engine Capacity: 1496 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 Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

### CONDITION OF TYRES

Front Tyre Size: 195/55 R15

Rear Tyre Size: 195/55 R15

Front Left Side: Achilles 2 mm

Rear Left Side: Dayton 6 mm

Front Right Side: Achilles 2 mm

Rear Right Side: Dayton 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	637.44	617.44	20.00	3.14
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,180.00	470.00	710.00	60.17
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Gross Total (S\$)</b>	<b>1,817.44</b>	<b>1,087.44</b>	<b>730.00</b>	<b>40.17</b>
<b>+ GST 7.00/7.00% (S\$)</b>	<b>127.22</b>	<b>76.12</b>	<b>51.10</b>	<b>40.17</b>
<b>Nett Amount (S\$)</b>	<b>1,944.66</b>	<b>1,163.56</b>	<b>781.10</b>	<b>40.17</b>

### INSPECTION

Date of Assignment: 16/01/2019

Date Inspected: 16/01/2019

Inspected At:

Optima Werkz Pte Ltd (HQ)  
9A Serangoon North Ave 5  
Singapore 554500

Estimated Period of Repair: 2.0 days

Adjuster: KENNETH KONG

Manager: SHIAU CHAN

*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.*



## REPAIR DETAILS

### Reference

<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 04 Mar 2019)
<b>Parts:</b> 144	TOYOTA AQUA HYBRID 1.5 E S CVT (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SLK4027Y)
<b>Validity:</b>	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
<b>Further Info:</b> Items/values not in reference catalogue are prefixed with an asterisk *.	

### Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*REAR BUMPER	Buckled	408.31 FL	*408.31 FL
2	1		*REAR BUMPER SIDE BRACKET RH	Distorted	68.28 FL	*68.28 FL
3	1		*REAR END PANEL (NPA)	Repair	0.00 FL	*- FL
4	1		*SET REAR BUMPER REVERSE SENSOR RH	Cracked	220.00 FS	*200.00 FS
5	1		*SET REAR BUMPER CLIPS	Necessary	60.00 FS	*60.00 FS
					<b>Sub Total (S\$)</b>	<b>756.59 736.59</b>
					<b>- List Item Discount on L Items 25.00/25.00% (S\$)</b>	<b>119.15 119.15</b>
					<b>Total Parts (S\$)</b>	<b>637.44 617.44</b>

F=Franchise part. S=SpcNett. L=ListItemDisc.

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
<u>Labour Items</u>				
1	LABOUR CHARGES FOR KNOCKING & PARTS REPLACEMENT & ETC	New	500.00	200.00
2	LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIAL	New	500.00	220.00
3	TO TUFF KOTE / ANTI-RUST	New	60.00	0.00
4	TO REMOVE & REFIX / REPLACE REAR BUMPER REVERSE SENSOR ETC	New	60.00	50.00
5	TO CHECK WIRING & ELECTRICAL SYSTEM	New	60.00	0.00
Gross Labour Cost (S\$)			1,180.00	470.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >