From (Person): Ong chi	nkiat of (	71	Date/Time 18/1/19/010-42er
Estimated Cost:  OD TP/WS/TP RES/	OD RES / EVA / INV / MV / CS	I to	
To Inspect Vehicle No:		Inquesd	SJW 2373X
at Workshop m/s	Truns Eurolears		6331 0682
of	27A Toniona Pe		- 0,010
Policy No. DMPC		Claim No:	
Sum Insured:		Excess:	
Make of Veh:			D.O.A. 10/01/2019
(Client's Record)			D. O. II.
	V 24 HRS Up)		22/11/98)2pm
CA / REV / REP. / REDate/Time: 11-24cm	-/1		22/11962m H.O.D. Endorsement:
CA / REV / REP. / REDate/Time: 11-24cm	Person Contacted:		22/11962m H.O.D. Endorsement:
CA / REV / REP. / REDate/Time: 11-24cmc  Date/Time Action/Instru	uction ( ) Estimate	obi	22/11962m H.O.D. Endorsement:
Date/Time: 11:04cmo  Date/Time Action/Instruction  SKO	18/119 Person Contacted: J 10ction ( ) Estimate 8596A-NBA/C11190066	obi	22/11962pm H.O.D. Endorsement:  Vehicle IN OUT  AUA: 10/01/19  AUA: 10/01/19
Date/Time: 11-24cmo  Date/Time: Action/Instruction  SKQ  81W 2	rection ( ) Estimate  8596A-NBA/CTL19006  CANTAINEL APTH JESSI	obi	22/11962pm H.O.D. Endorsement:  Vehicle IN OUT  AUA: 10/01/19  AUA: 10/01/2010
Date/Time: 11-24cmo  Date/Time: Action/Instruction  SKQ  81W 2	rection ( ) Estimate  8596A-NBA/CTL19006  CANTAINEL APTH JESSI	obi	22/11962pm H.O.D. Endorsement:  Vehicle IN OUT  AUA: 10/01/19  AUA: 10/01/2010
Date/Time: 11-24cmo  Date/Time: Action/Instruction  SKQ  81W 2	18/119 Person Contacted: J 10ction ( ) Estimate 8596A-NBA/C11190066	obi	22/11962pm H.O.D. Endorsement:  Vehicle IN OUT  AUA: 10/01/19  AUA: 10/01/2010

Taufik	N REF:	CT	
	and the same of th	<u> </u>	*NMENI
From	: Datg:		Vehillo SKQ8596 A YrRegni 2014 De
Estimated Cost.			Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD	DES / EVA / INV / MV		
To Inspect Vehicle No:	NEOTE YATELY CITE		Make Min Cooper. UB 3DR. a.c. 1499
*	ખ <i>ે</i>		Colour Cream A/C: Insured / Std / NI / N/
at Workshop m/s			Sp.Reading 42009 T/Radio: Insured / Std / NI / N
of	¥		[Fac(Na)
Insured			C/No: WM WXM520103A53124
Policy No.			Gen. Cond: Good / Fair / Poor / Burnt
Claims No.	F.,,,,,,,		Steering: Inorder / Jammed / Leaked / Burnt or
Sum Insured:	Excess:	÷	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record)			
Make of Veh:	¥I	*	Modi: Nil / S/Rim / STD A/Rim or / S/Rim Tyre Size: F:
			R:
(Policy Condition)		N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Remark: The veh had com repair at the time		14/5 0/0	TOYO/YOKO or
repair at the time	A A		Deer (
Bal, or Market Value.	y nok .		P/Ral
IDAC Accident Rport:	Consistent?: Yes		17/Dal.
GIA / PR Seen:	Consistent?: Yes		1001 92/1/19/
Est. Repairs: 3	days Res.: Yes		U.O.A.
Lum Sum:	% 3 Val.: Yes	or No	Survey Heid at Car v / at ) C / 1 J
CA / REV / REP. /	24 HRS	1	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
	rson Contacted:	Vehicle: IN / OU	The U/C / Chassis frame / Body Structure affected due to coll
		0.0 17	Celate 95.0/49/
Date / Time Action /	Instruction		John John John John John John John John
			Men
	R	ECEIVEL	0 1 FEB 2019
	بخودز		
			1/2/-
Date/Time File Pass to?	: Preli. Report		Days Of Repair:
11 01/2. Minst	: Final Report		Resurvey No. of Trip: Survey Fee.
Date/Time File Return to?	# TO TAKE	(g) 100 d 422	Transportation
2:	* ,	Add F	hardway .
	1 70	2	Interview (\$ Christ)
Report Format :	wer-te		Tech. Invs (\$ 1 Ober
Lump Sum / I.B. I: (	4513-87	1	Westend (\$

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

Case N	lotified	Est Submitted	Adj Assigned	Adj Rpt	Adjs	ubmitted	Ins Authled	Status	2/	
10.07	8 Jan 2019 0:41		18 Jan 2019 10:42 Assign					New	Assignme el Case	ent
M:	ain	Re	ference		Claim Details	;	Documen	ts	7	Show All
CLAIM SUB	FOLDER DE	TAILS		Service Service (Service of Service of Servi		Creat	ed by insurer1			at College as the College
Insured:		D HAFIS BIN SEL	AMAT, ID: S8	838884D	***************************************	Loreat	ed by msurerj			
Main Claimant:	YEO LAY	2001500 172504	342583B							
Vehicle Reg. No.:	SKQ859	KQ8596A Date of Loss: 10/01/2019 11:00 - :59 [48 Months and 10 Days From LTA Reg Date (Man Yr)]								
Claim Type:	TP				Policy/Cove	r DMPCSI				
Vehicle Reg. No. (Insured):	SJW2373	x			Policy No. (Claimant):	DIOMTE	D18MTPV01018666			
					Excess:	S\$0.00				
Repairer:	Eurokars	Habitat Pte Ltd (	Penjuru) 27A T	Tanjong Penj	juru, 609042 W	/est Coast -	Tel:			
Handling Insurer:	China Tai	ping Insurance (	Singapore) Pte	e. Ltd. (HQ	) - Tel: 6389 6	111 [Har	ndled by <b>Ong Chin</b>	Kiat]		
Claimant's Insurer:	Sompo In	surance Singapo	re Pte. Ltd. (H	<b>Q) -</b> Tel: 64	61 6555		*			
Adjuster:	LKK Auto	Consultants Pte	Ltd (HQ) - Tel:	6256-3561	[Final Rp	t due 29/	01/20191			
Driver/Custo dian (Insured):		HAFIS BIN SELAM					,			
ASSOCIATE	D MAIL RE	CEIVED						/iew All 1	Compos	e Case Mail
There are no	mail for this	case.				······································			Compos	C Guac Mail
ALL ASSOC	ATED TAS	KS⊡				View A	II   Search Tasks	Crost-	New Task	C
Due Date No results.	Priority	Type Task 0	Group Subj	ect Han	dler Assig	ned By	Completed On	-	eated On	Complete

#### Shiau Chan (LKKAuto)

From:

Shiau Chan (LKKAuto)

Sent:

Friday, 1 February 2019 10:56 AM

To:

'jessicahs@eurokars.com.sg'; jobithomas@eurokars.com.sg; Taufikh (LKKAuto)

Cc:

sarah.candida@eurokars.com.sg; SUR; Admin A

Subject:

RE: FINALIZATION CHINA TP SKQ8596A

Dear Jessica,

#### WITHOUT PREJUDICE

Confirm final fig \$4,513.81 before GST and 3 repair days.

Kindly send the relevant documents to China Taiping Insurance company.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: <u>siewsc@lkkauto.com</u> | fax: 6256-4315 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: jessicahs@eurokars.com.sg <jessicahs@eurokars.com.sg>

Sent: Friday, 1 February 2019 9:20 AM

To: jobithomas@eurokars.com.sg; Taufikh (LKKAuto) <Taufikh@lkkauto.com>

Cc: sarah.candida@eurokars.com.sg; SUR <sur@lkkauto.com>; Admin A <admin-a@lkkauto.com>

Subject: FINALIZATION CHINA TP SKQ8596A

Dear Taufikh,

Please find our computation attached for your agreement.

TOTAL: \$ 4,513.81 before GST

3 repair days (not including preparation of estimate, wait for liability/wait for survey/authorization/spare parts, Sat/Sun/PH)

Appreciate your confirmation for this case urgently.

Thank you very much.

Regards,

JESSICA SHASTRI

Admin Executive - Insurance Claims

27A, Tanjong Penjuru Singapore 609042

Dir: +65 6331 0691 | Fax: +65 6331 0690 | Email: jessicahs@eurokars.com.sg

Website: www.eurokarsgroup.com

From: Jobi Thomas < jobithomas@eurokars.com.sg>

Sent: 31 January 2019 10:15 AM

To: taufikh@lkkauto.com

Cc: Jessica Harry Shastri < jessicahs@eurokars.com.sg>

Subject: SKQ8596A BEFORE PAINT PHOTOS

#### 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

aforesaid.	
Mark schill tacke green server en	ACCIDENT STATEMENT
Date Of Report	10/01/2019 13:53
Date Of Accident	10/01/2019 11:00
Exact Location Of Accident	SLIP RD(ALEXANDRA ROAD TWDS TANGLIN RD)
Country/State of Loss	SINGAPORE
A CALL CONTRACTOR OF THE CALL CONTRACTOR OF T	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKQ8596A
Insured/Policyholder	
Name Of Registered Owner	YEO LAY CHOON
NRIC No	S6842583B
Email Address	O_HAIYO@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98322544
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	MINI
Model	COOPER-1.5 HATCHBACK 3DR LED DSC (A)
Exact Purpose for which vehicle was being used at time of accident	
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 CAR
Insurance Company	
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MTPV01018666
Cover Note Number	
Driver	

Name of Driver YEO LAY CHOON NRIC No S6842583B

Date Of Birth 07/11/1968 Occupation **INDOOR** Date Of Driving Pass 20/07/1991

27 YEARS AND 5 MONTHS **Driving Experience** 

**FEMALE** Gender

(LOCAL) +65-98322544 Mobile Number

Fax Number

OFFICE-NOPHONE Contact Number

**EMail Address** O\_HAIYO@YAHOO.COM Address

456 CORPORATION ROAD #02-08

Postcode

649813

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

**OWNER** 

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

#### General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

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)

#### **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

Please Refer Accident Sketch Plan.

#### 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

SJW2373X

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

MOHAMED HAFIS BIN SELAMAT

NRIC/Passport Number

S8838884D

Contact Number

85716583

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

VILL A: SEQ 8516A

Vehe: SJW0373X

#### IMPORTANT NOTICE

- I. 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.
- 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 flability.
- 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.
- 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.
- 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:
  - 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;
  - (fii) 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.

"I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMESHAME FOR ME TO SUBMIT ANOWIN DAMAGE CLAIM UNCER MY OWN POLICY I WILL \$150 KM POLICY FOR WORE DETAILS

Policyholder's Signature

12/17

Date & Time: 10 Jax 19

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

#### Sketch Plan #2

SKETCH PLAN Veh A: SIKB 8596A Veh B: SIM 2373 X	Tangin Kd
	4 9
	> Alexandra Ral
	37
	3
DESCRIBE CIRCUMSTANCES OF THE AC	CIDENT
T refuce conner of	Ste 8596A was diving along
Attronoura Road	and turning left to join Targlin Road.
table 7 Hopping Ma	and turning left to join Tanglin Road.
from The right 12	hicle 55h 2373x hit the back of
my car.	
They cross.	
L DECLARATION  I/We declare the foregoing particulars are true.	ie in évery respect.

Poncyholder's Signature Date & Time 16 Jan 19

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

#### Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: 566550020G / GST Reg. No.: M400017735

 $\underline{\textbf{IMPORTANT NOTE:}} \quad \textbf{Please submit the completed Addendum form to the } \underline{\textbf{same}} \,\, \textbf{Authorised Reporting Centre}$ with whom you submitted the Original Report.

## **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : MAAS 19004343 Sk & 85 96 A \_Vehicle Registration No:

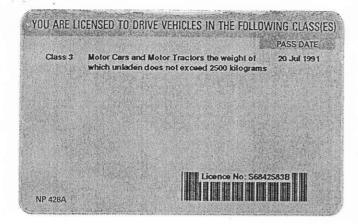
	Name(asshownin NRIC): Yeo Lay Choon NRIC/FIN/Passport No: 36842583B
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
	Address :Singapore(
	Contact (Tel) :Mobile No.: 9832 2544
	Email Address :
	Date of Accident : 10.1. 7019Time of Accident : 11.00 HR-S
	Place of Accident: Stip Rd ( Alexandra Kd Twds Tanglin Kd)
	Insurance Company: Sampo Insurance Shyapore Ha Ltd
(B)	
1	I have made a report on the above mentioned accident and would like to include additional information or
	make the following amendments:
	Amend Third Party HRIC Humber & Contact Humber.
100	

Policyholder / Driver's Signature
Date: 1 i JAN 2010

Reporting Centre Personnel's Signature

Name: (eta Lai NRIC/FINNo.:

1 i JAN 2019 Date:











China Taiping Insurance (S) Pte Ltd

# EUROKARS HABITAT PTE LTD 27A TANJONG PENJURU, SINGAPORE 609042



25054

WIP:

ESTIMATE COST OF REPAIRS

Ms Yeo Lay Choon

NAME:

3 Anson Rd, #16-00 Springleaf Tower ADDRESS: 456 Corporation Rd **EXCESS:** Singapore 079909 #02-08 Parc Vista DATE: 11.01.2019 Singapore 649813 ATTN.: MOTOR CLAIMS TFI . 98322544 FAX: VEH NO: SKQ8596A DATE IN: **CONTACT PERSON:** JOBI THOMAS 63310682 CHASSIS NO: WMWXM520103A53124 MILEAGE: TYPE OF CLAIM: TP MODEL: DATE REG.: F56 MINI 31.12.2014 POLICY NO. : **NATURE OF WORKS Parts Description** S/NO QTY REVISED PRICES de REAR BUMPER M51.12.7.380.009 \$ 914.42 But **BUMPER SPOILER** 299.58 1 M51.12.7.380.015 Xun **BUMPER BRACKET** 1 \$ 3 M51.12.7.380.019 78.46 TRIM COVER CHORM 1 M51.12.7.365.737 101.79 nel. BLIND RIVET 4 M07.14.7.411.141 \$ 15.08 5 646.62 nu \$ SENSOR PARKASSIST 4 B66.20.9.274.428 1,293.24 6 ner-SENSOR GASKET 4 B66.20.9.283.203 \$ 26.32 Nun RR FOG LIGHT 8 1 M63.24.6.946.904 \$ 169.00 **TOTAL PARTS** 2,897.89 \$ **TOTAL PARTS COST** \$ 2,897.89 **Labour Description** 840 840. TO REPLACE REAR BUMPER. BUMPER SPOILER & TO REPAIR ALL \$ 1,000.00 AREAS AFFECTED BY THE ACCIDENT. 200 2 TO RESPRAY REAR BUMPER \$ 1,000.00 LKK Auto Consultants hence notify the Repairer of the following 4120 • To resurvey before/after spray painting 3 TO TRANSFER THE REVERSE SENSORS. \$ 500.00 To display damaged part(s) during resurvey Parts prices are subject to confirmation 4 TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING. \$ 250.00 . Third party survey is on a "Without Prejudice" by . No illegal modification(s) is allowed Supplementary item(s) must be resurveyed and 5 TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS \$ 350.00 is subject to final approval from Insurance Comp Acknowledged by Repairer 50 SUNDRIES. 6 NETT \$ 100.00 nec Signature: Date: TOTAL LABOUR \$ 3,200.00 TOTAL PARTS 2,897.89 \$ Ś TOTAL 6.097.89 \$ \$ LESS EXCESS \$ TOTAL AFTER EXCESS \$ \$ **GST 7%** 

CRAND TOTAL			4	
GRAND TOTAL	15	-	15	-

#### REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT.

TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A QUOTATION FEE OF \$400.00 WILL BE APPLY AS ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.



### **EUROKARS HABITAT PTE LTD** 27A TANJONG PENJURU, SINGAPORE 609042 FINALIZATION COST OF REPAIRS



25054

11.01.2019

China Taiping Insurance (S) Pte Ltd

3 Anson Rd, #16-00 Springleaf Tower

Singapore 079909

NAME: ADDRESS : Ms Yeo Lay Choon

456 Corporation Rd

#02-08 Parc Vista

Singapore 649813

ATTN.: FAX:

MOTOR CLAIMS

TEL:

DATE IN:

98322544

JOBI THOMAS 63310682 CONTACT PERSON:

WIP:

EXCESS:

DATE:

VEH NO: SKQ8596A

AFILLA	0.	S.N.Q.O.O.O.	ERROR TO ST						
CHASS	IS NO :	WMWXM520103A53124	MILEAGE:		TYPE OF CLAIM:		5. T	P	
MODE	L:	F56 MINI	DATE REG.:	31.12.2014	POLICY NO. :				
				NATURE OF WO	ORKS_				
s/NO			<u>Par</u>	rts Description					
				QTY		F	REVISED	PRICES	
1	REAR BUM	PER		1	M51.12.7.380.009	\$	914.42	\$	914.42
2	BUMPER SI	POILER		1	M51.12.7.380.015	\$	299.58	\$	299.58
3	BUMPER B	RACKET	-	1	M51.12.7.380.019	\$	-	\$	78.46
4	TRIM COVE	R CHORM		1	M51.12.7.365.737	\$	101.79	\$	101.79
5	BLIND RIVE	Т		4	M07.14.7.411.141	\$	15.08	\$	15.08
6	SENSOR PA	RKASSIST		2	B66.20.9.274.428	\$	646.62	\$	1,293.24
7	SENSOR GA	ASKET		4	B66.20.9.283.203	\$	26.32	\$	26.32
8	RR FOG LIG	ЭНТ		1	M63.24.6.946.904	\$	-	\$	169.00
					TOTAL PARTS	\$	2,003.81	\$	2,897.89
								\$	-
					TOTAL PARTS COST	\$	2,003.81	\$	2,897.89
			Labour Descripti	on					
1	TO REPLAC	E REAR BUMPER. BUMPER SPO	ILER & TO REPAIR	ALL		\$	840.00	\$	1,000.00
	AREAS AFF	ECTED BY THE ACCIDENT.							
2	TO RESPRA	Y REAR BUMPER .				\$	800.00	\$	1,000.00
3	TO TRANSI	FER THE REVERSE SENSORS.				\$	420.00	\$	500.00
4	TO CHECK	ELECTRICAL SYSTEM FOR PROPE	ER FUNCTIONING.			\$	150.00	\$	250.00
5	TO REPRO	GRAMME AFTER THE ACCIDENT	REPAIR WORKS.			\$	250.00	\$	350.00
6	SUNDRIES					\$	50.00	\$	100.00
					TOTAL LABOUR	\$	2,510.00	\$	3,200.00
					TOTAL PARTS	\$	2,003.81	\$	2,897.89
					TOTAL	\$	4,513.81	\$	6,097.89

TOTAL \$ LESS EXCESS \$ 4,513.81 TOTAL AFTER EXCESS \$ 315.97 \$ **GST 7%** 

GRAND TOTAL	Ś	4.829.78	Ś	-
GILLIO I GILL	1 7	.,	T	

NUMBER OF DAYS: 3 WORKING DAYS(EXCLUDE WAITING FOR SURVEY, AUTHORIZATION, PARTS, SAT, SUN & PH)

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

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/CTI19001139/T1QD3N2

Date:

11/02/2019

DMPCSN3009541800

REFERENCE

Handling Insurer:

China Taiping Insurance (Singapore) Pte.

Claimant Vehicle No:

Date of Loss:

SKQ8596A

10/01/2019

Policy No:

Insured Vehicle No:

Nature of Claim:

SJW2373X

TP

**Engine No:** 

Chassis No:

Odometer:

Claim No:

F6980932B38A15A

42009 km

WMWXM520103A53124

N/A

**DESCRIPTION & IDENTIFICATION OF VEHICLE** 

Reg No:

SKQ8596A

Make & Model:

MINI COOPER, 1.5 HATCHBACK 3DR LED DSC

(A)

Reg. Date:

31/12/2014 (Man. Year: 2014)

Cream

**Engine Capacity:** 

1499 cc

Market Value/New Car

Price:

Colour:

N/A

Sum Insured (S\$):

Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition:

Steering (Serviceable):

Footbrake (Serviceable):

Yes

Handbrake (Serviceable):

Yes Engine Modification:

Pre-accident Condition: No

**CONDITION OF TYRES** 

Front Tyre Size:

195/55R16

Rear Tyre Size:

195/55R16

Front Left Side:

Goodyear 6 mm

Rear Left Side: Rear Right Side: Goodyear 6 mm Goodyear 6 mm

Front Right Side: Goodyear 6 mm The above values represent the remaining tyre treads depth

COST OF CLAIM Parts Miscellaneous Item		<b>Repairer's</b> 2,997.89 0.00	<b>Adjuster's</b> 2,053.81 0.00	<b>Difference</b> 944.08 0.00	<b>Diff</b> % 31.49
Labour		3,100.00	2,460.00	640.00	20.65
Paintwork Labour		0.00	0.00	0.00	
Towing		0.00	0.00	0.00	
	Gross Total (S\$)	6,097.89	4,513.81	1,584.08	25.98
	+ GST 7.00/7.00% (S\$)	426.85	315.97	110.88	25.98
	Nett Amount (S\$)	6,524.74	4,829.78	1,694.96	25.98

**INSPECTION** 

Date of Assignment:

18/01/2019

Date Inspected:

22/01/2019 Inspected At:

Eurokars Habitat Pte Ltd (Penjuru)

27A Tanjong Penjuru Singapore 609042

Estimated Period of Repair:

3.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

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.

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#### REPAIR DETAILS

Reference

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 11 Feb 2019)

Parts: 144 MINI COOPER 1.5 HATCHBACK 3DR LED DSC (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: (Unsubmitted, no print-code for SKQ8596A)

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 not in reference catalogue are prefixed with an asterisk \*.

#### Recommended Parts

Qty	Part No.	Particulars	Condition	Repairer's	Amount
1		*REAR BUMPER	Deformed	914.42 FS	*914.42 FS
1		*BUMPER SPOILER	Cut	299.58 FS	*299.58 FS
1		*BUMPER BRACKET *TRIM COVER CHORM	Not Necessary Cut	78.46 FS 101.79 FS	*- FS *101.79 FS
4 1		*BLIND RIVET *SENSOR PARKASSIST (4 Pcs)	Necessary Not Working (2Pcs only)	15.08 FS 1,293.24 FS	*15.08 FS *646.62 FS
4		*SENSOR GASKET *RR FOG LIGHT	Necessary Not Necessary	26.32 FS 169.00 FS	*26.32 FS *- FS
1 anchise	part. S=SpcNe	*SUNDRIES ett.	Necessary	100.00 FS	*50.00 FS
			Total Parts (S\$)	2,997.89	2,053.81
	1 1 1 1 4 1	1 1 1 1 4 1	1 *REAR BUMPER 1 *BUMPER SPOILER 1 *BUMPER BRACKET 1 *TRIM COVER CHORM 4 *BLIND RIVET 1 *SENSOR PARKASSIST (4 Pcs) 4 *SENSOR GASKET 1 *RR FOG LIGHT	1         *REAR BUMPER         Deformed           1         *BUMPER SPOILER         Cut           1         *BUMPER BRACKET         Not Necessary           1         *TRIM COVER CHORM         Cut           4         *BLIND RIVET         Necessary           1         *SENSOR PARKASSIST (4 Pcs)         Not Working (2Pcs only)           4         *SENSOR GASKET         Necessary           1         *RR FOG LIGHT         Not Necessary           1         *SUNDRIES         Necessary	1         *REAR BUMPER         Deformed         914.42 FS           1         *BUMPER SPOILER         Cut         299.58 FS           1         *BUMPER BRACKET         Not Necessary         78.46 FS           1         *TRIM COVER CHORM         Cut         101.79 FS           4         *BLIND RIVET         Necessary         15.08 FS           1         *SENSOR PARKASSIST (4 Pcs)         Not Working (2Pcs only)         1,293.24 FS           4         *SENSOR GASKET (4 Pcs)         Necessary         26.32 FS           1         *RR FOG LIGHT (59.00 FS)         Not Necessary         169.00 FS           1         *SUNDRIES (59.00 FS)         Necessary (100.00 FS)

Report was unsubmitted during this print-out.

## Recommended Miscellaneous Items

There are no new miscellaneous items selected.

articulars	Lab.Type	Repairer's	Amount
ltems_			2 100 2 2
REPLACE REAR BUMPER, BUMPER SPOILER & TO EPAIR ALL AREAS AFFECTED BY THE ACCIDENT	New	1,000.00	840.00
RESPRAY REAR BUMPER	New	1,000.00	800.00
	New	500.00	420.00
CHECK ELECTRICAL SYSTEM FOR PROPER	New	250.00	150.00
O REPROGRAMME AFTER THE ACCIDENT REPAIR ORKS	New	350.00	250.00
Gross Labo	our Cost (S\$)	3,100.00	2,460.00
	tems O REPLACE REAR BUMPER, BUMPER SPOILER & TO EPAIR ALL AREAS AFFECTED BY THE ACCIDENT O RESPRAY REAR BUMPER O TRANSFER THE REVERSE SENSORS O CHECK ELECTRICAL SYSTEM FOR PROPER JNCTIONING O REPROGRAMME AFTER THE ACCIDENT REPAIR ORKS	TEEMS  O REPLACE REAR BUMPER, BUMPER SPOILER & TO New EPAIR ALL AREAS AFFECTED BY THE ACCIDENT  O RESPRAY REAR BUMPER New O TRANSFER THE REVERSE SENSORS New O CHECK ELECTRICAL SYSTEM FOR PROPER New JINCTIONING  O REPROGRAMME AFTER THE ACCIDENT REPAIR New	TEEMS  O REPLACE REAR BUMPER, BUMPER SPOILER & TO New 1,000.00  EPAIR ALL AREAS AFFECTED BY THE ACCIDENT  O RESPRAY REAR BUMPER New 1,000.00  O TRANSFER THE REVERSE SENSORS New 500.00  O CHECK ELECTRICAL SYSTEM FOR PROPER New 250.00  UNCTIONING  O REPROGRAMME AFTER THE ACCIDENT REPAIR New 350.00  ORKS

< END OF ESTIMATES >