

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Justin Wong

of

AGI

Date/Time: 11/2/19 @ 1:30pm

Estimated Cost:

Bill to:

OD / (P) WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SHC 5564X

Insured:

SGG 7679B

at Workshop m/s

Trans Ceib

Tel:

6287 6666

of

No. 2 Amk St - 63

Policy No:

Claim No:

C10002626

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

8/2/2019

CA / REV / REP. / REV 24 HRS (y)

H.O.D. Endorsement:

Date/Time:

1:37pm @ 11/2/19

Person Contacted:

Amenda

Vehicle (IN) OUT

Date/Time	Action/Instruction (✓) Estimate
	SHC 5564X - CS/AGI 19002398/Dwh JJA: 11/2/2019
	SGG 7679B - CS/LPC 09005184/T/bg1 JJA: 17/6/2018

ASS. REC. BY:

REF: AG11

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Trans Cab

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 07 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: S14C 5564X Yr Regn: 09, 14

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____

Make: Perodua Longitude c.c. 1995

Colour: m White / Red AC: Insured / Std / NI / NA

Sp. Reading: 283133 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VF1A BCL15AUC 279312

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: M1 / S/Rim / STD A/Rim or

Tyre Size: F: G7 215/60R16

R: G7i

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

Front R/Bal. 7 mm Rear R/Bal. 8 mm

L/Bal. 7 mm L/Bal. 8 mm

D.O.A. 8/2/19 D.O.I. 11/2/19

Survey held at _____

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

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

Date / Time	Action / Instruction
<u>1</u>	<u>File pass to</u> <u>U/Eng 88500 (Red 826762.76, 76%)</u>

RECEIVED 15 FEB 2019

Date/Time, File Pass to? : Prell. Report
 : Final Report

Date/Time, File Return to?
2)

Report Format: TP
Lump Sum / I.B.F.: (\$ 8500)

Days Of Repair: 7
Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$)
 : Interview (\$)
 : Tech Invs (\$)
 : Weekend (\$)

Survey Fee: _____
Transportation: _____ \$ + RS. \$
Photos _____
Others _____
TOTAL 450

Nivitha (LKK Auto)

From: Justin Wong <justin.wong@budgetdirect.com.sg>
Sent: Monday, 11 February 2019 1:30 PM
To: assignments@lkkauto.com
Cc: sur@lkkauto.com; Albert Hong
Subject: Appoint LKK to conduct TP survey; Our Ref: C10002626
Attachments: image001.wmz; img-211110330.pdf; OI GIA - SGG7679B.pdf; TP GIA - SHC5564X.pdf

Hi Team,

Please accept survey assignment and liaise with TP workshop.

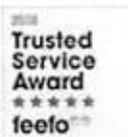
Thank you.

Regards,

Justin Wong
Executive, Claims

T +65 6540 2184
F +65 6725 0853
E Justin.wong@budgetdirect.com.sg

**Budget
Direct**
insurance



Customer Care +65 6221 2111
Claims +65 6221 2199
Claims (Int.) +65 6540 2199

190 Clemenceau Avenue, #03-01
Singapore Shopping Centre
Singapore
239924
budgetdirect.com.sg

auto  general

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G) trading as **Budget Direct Insurance**.

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From: Amanda Tay <amanda.tay@transcab.com.sg>
Sent: Monday, 11 February, 2019 11:06 AM
To: Julie Mangubat <julie.m@budgetdirect.com.sg>; Lincoln Yeo <lincoln.yeo@budgetdirect.com.sg>; Albert Hong

<albert.hong@budgetdirect.com.sg>

Cc: 'Candy Kong' <candy.kong@transcab.com.sg>

Subject: Arrange for survey for SHC5564X

Dear all,

PLS ARRANGE LKK AUTO CONSULTANTS PTE LTD TO SURVEY.

Please arrange for survey as below :

SGG7679B - 08.02.2019 at 1000Hrs – SHC5564X

Lunch time : 12pm - 1pm.

Kindly pls dun arrange survey during lunch time.

"We Agree to let your In-house surveyor assess/ survey our vehicle with estimate."

Thks & Rdgs
Amanda Tay
Claims Service Assistant



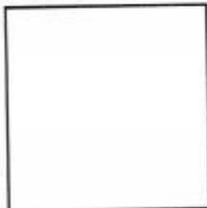
TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63, Singapore 569111

Main Line :(65) 6287 6666 Fax Line: (65) 6257 1330

Website: www.transcab.com.sg

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www.avg.com

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> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3878K
Vehicle Details	
Vehicle No.:	SHC5564X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	08 Feb 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2014
Engine No.:	M9R8839C001911
Chassis No.:	VF1ABL15AUC279312
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	15 Sep 2014
First Registration Date:	15 Sep 2014
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Sep 2022
PARF Rebate Amount:	\$9,373.00
Intended COE Rebate Details	
COE Expiry Date:	14 Sep 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,704.00
COE Rebate Amount:	\$22,816.00
Total Rebate Amount:	\$32,189.00
Message	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 08 Feb 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	08/02/2019 10:27
Date Of Accident	08/02/2019 10:00
Exact Location Of Accident	BLK 191 BISHAN STREET 13 CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC5564X
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND 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	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	
Driver	
Name of Driver	TAN THIAM POH
NRIC No	S1692798H
Date Of Birth	24/06/1965
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1985
Driving Experience	33 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90675455
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address BLK 297B CHOA CHU KANG AVENUE 2
#10-84

Postcode 682297

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 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) involved in the accident 2

Was any body injured in the Accident? NO

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) soliciting/offering accident claims assistance. NO

Number of Passengers (Including Driver) 2

Passenger 1 NAME: : UNKNOWN
GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name THOMSON NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 25 SIN MING ROAD , POSTCODE: 570025 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-4529999 - FAX NO: 6 5535740

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Please see the attach Police Report T/20190208/2060.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: FILE TOO BIG

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGG7679B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

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

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.



Amanda

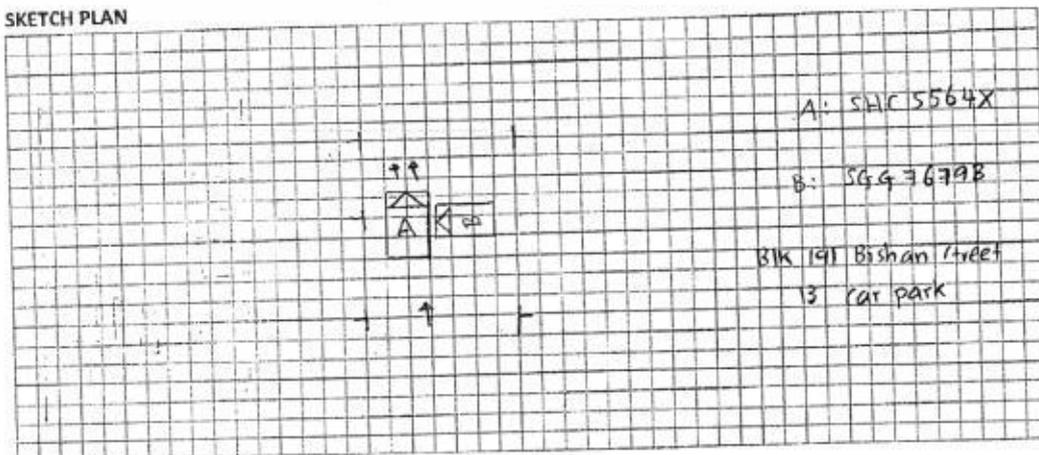
Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

please see the attach police report

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:

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



**SINGAPORE
POLICE FORCE**



T/20190208/2060

1 of 3

Report No. T/20190208/2060

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/02/2019 13:41		Vide Report No.:		Station Diary No.: 33	
Informant's Particulars:					
Name of Informant: TAN THIAM POH			Address: APT BLK 297B CHOA CHU KANG AVENUE 2 #10-84 SINGAPORE 682297		
ID Type / ID No.: NRIC NO / S1692798H			Contact No.:		Mobile: 90675455
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 53	Date of Birth: 24/06/1965	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3,4,5		Date of Expiry:

General Information of the Accident:				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/02/2019 10:00	Type of Location: Car Park
Location: Along Road 1 BISHAN STREET 13				
Open Space Car Park in front 191 Bishan St 13				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SGG7679B	Car					0
SHC5564X	Car				Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190208/2060

2 of 3

Report No. T/20190208/2060

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

CONTINUATION OF REPORT

DRIVER			
Name	TAN THIAM POH	ID No.	S1692798H
Related Vehicle	SHC5564X (Car)	Contact No.	90675455
Hospital/Clinic	SIN MIN CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	08/02/2019	Date Discharge	08/02/2019
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On above mentioned date and time, I was traveling along Open Space Car Park in front of Blk 191 Bishan St 13. Suddenly, one vehicle from my right collided onto right side of my vehicle and caused dent on both of my right side driver and rear passenger's doors. As such I stopped the vehicle, however while I wanted to exchange the particular with the driver, he refused and ask me to take down his vehicle number. I felt right side of neck and right side of my upper back were in pain. As such I sought medical treatment at Sin Min Clinic and was given 7 days MC.

Police Report Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190208/2060

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

3 of 3

Report No. T/20190208/2060

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: E / Sgt 2 ZHU JIANBIN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 08/02/2019 13:41
Officer In Charge Of Case: TP / AEIT / SSI 2 SITIMARSITA BINTE BOHARI Contact No.: 65476219 	Classification Of Case: SN 070
Authentication Stamp NP168 	SIGNATURE

Trans-cab Auto Services Pte Ltd

AAD1902-053

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHC 5564X

Not Authorized
11 Sep 885001

Vehicle No.:
Chassis No.:
Vehicle Make:
Vehicle Model:
Date of Accident :
Third Party Insurer :
Date of Registration :

SHC 5564X
VF1ABL15AUC279312
RENAULT
LATITUDE
8.2.2019
AUTO & GENERAL
15/9/2014

	PART		LIST
1	DOOR PANEL FRT RH	\$	<i>R</i> 2,844.66 ✓
1	DOOR HINGE UPPER RH	\$	<i>R</i> 261.28
1	DOOR HINGE LOWER RH	\$	<i>R</i> 300.55
1	DOOR CHECK FRT RH	\$	<i>Sen</i> 194.77
1	DOOR LOCK FRT RH	\$	<i>R</i> 908.75
1	DOOR CATCH FRT RH	\$	<i>Sen</i> 131.23 } X
1	DOOR HANDLE OUTER FRT RH	\$	<i>Sen</i> 477.76
1	DOOR HANDLE COVER FRT RH	\$	<i>Sen</i> 13.22
1	DOOR HANDLE MODULE FRT RH	\$	<i>Sen</i> 133.60
1	DOOR REGULATOR FRT RH	\$	<i>Sen</i> 505.19
1	DOOR REGULATOR MOTOR FRT RH	\$	<i>Sen</i> 796.46
1	DOOR REGULATOR GUIDE FRT RH	\$	<i>Sen</i> 120.97
1	DOOR PANEL REAR RH	\$	<i>R</i> 2,844.66 ✓
1	DOOR GUIDE REAR RH	\$	<i>Sen</i> 176.82
1	DOOR HINGE UPPER RH	\$	<i>R</i> 274.50
1	DOOR HINGE LOWER RH	\$	<i>R</i> 300.55
1	DOOR CHECK REAR LH/RH L70Y	\$	<i>Sen</i> 203.06
1	DOOR LOCK REAR RH	\$	<i>R</i> 908.75
1	DOOR HANDLE OUTER REAR RH	\$	<i>Sen</i> 126.49
1	DOOR HANDLE CAP REAR RH	\$	<i>Sen</i> 35.52 } X
1	DOOR HANDLE SEAL REAR RH	\$	<i>Sen</i> 7.89
1	DOOR HANDLE COVER REAR RH	\$	<i>Sen</i> 13.22
1	DOOR HANDLE MODULE REAR RH	\$	<i>Sen</i> 133.60
1	DOOR REGULATOR REAR RH	\$	<i>R</i> 1,135.10
1	DOOR REGULATOR MOTOR REAR RH	\$	<i>R</i> 893.75
1	DOOR REGULATOR NUT REAR L70Y	\$	<i>Sen</i> 12.43
1	DOOR REGULATOR MOTOR SCREW REAR L70Y	\$	<i>Sen</i> 6.31
1	DOOR FINISHER REAR RH	\$	<i>Sen</i> 423.10
1	DOOR MOULDING REAR RH	\$	<i>Sen</i> 176.82

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHC 5564X

AAD1902-053

1	DOOR MOULDING CLIP L70Y	\$	<i>nn</i> 5.92	}
1	DOOR MOULDING SCREW L70Y	\$	<i>sn</i> 6.91	
1	DOOR CASING REAR RH	\$	<i>sn</i> 1,509.06	
1	DOOR WATER SHIELD REAR RH	\$	<i>sn</i> 30.39	
1	DOOR CASING CLIP	\$	<i>nn</i> 12.63	
1	DOOR CASING LIGHT L70Y	\$	<i>sn</i> 48.74	
1	DOOR FINISHER INNER REAR RH	\$	<i>sn</i> 323.44	
1	DOOR FINISHER BRACKET INNER REAR RH	\$	<i>r</i> 46.97	
1	DOOR FINISHER BRACKET INNER REAR RH	\$	<i>r</i> 20.33	
1	DOOR FINISHER BRACKET INNER REAR RH	\$	<i>r</i> 20.33	
1	DOOR FINISHER BRACKET INNER REAR RH	\$	<i>r</i> 20.33	
1	DOOR GRAB HANDLE REAR RH	\$	<i>sn</i> 210.96	
1	DOOR BLIND REAR RH	\$	<i>sn</i> 741.80	
1	DOOR WHEATHESTRIIP REAR RH	\$	<i>sn</i> 410.66	
1	DOOR SEAL REAR RH	\$	<i>sn</i> 162.02	
1	DOOR GLASS RUNNER SEAL REAR RH	\$	<i>sn</i> 229.31	
1	DOOR WAIST SEAL OUTER REAR RH	\$	<i>sn</i> 334.69	
1	DOOR WAIST SEAL INNER REAR RH	\$	<i>sn</i> 115.64	
1	DOOR MIRROR ASSY RH	\$	<i>sn</i> 1,483.40	
1	ROCKER PANEL INNER GARNISH RH	\$	<i>r</i> 466.51	
1	ROCKER PANEL INNER RH	\$	<i>r</i> 1,024.79	
1	ROCKER PANEL CENTER RH	\$	<i>r</i> 990.25	
1	FENDER PANEL REAR RH	\$	<i>B</i> 3,299.13	
1	FENDER PANEL INNER TRIM REAR	\$	<i>sn</i> 671.45 X	
1	WHEELARCH REAR RH	\$	<i>sn</i> 543.47 X	

\$	27,090.14
10% \$	2,709.01
\$	24,381.13

Special Nett

1	FRONT DOOR STICKER 'TRANS-CAB'	\$	<i>nn</i> 80.00 <i>60sn</i>
1	FRONT DOOR STICKER 'CHASSIS'	\$	<i>nn</i> 50.00 <i>15sn</i>
1	REAR DOOR STICKER '6555-3333'	\$	<i>nn</i> 80.00 <i>80sn</i>
1	DOOR CHECK BOLT	\$	<i>nn</i> 22.69 X
1	DOOR GUIDE SCREW	\$	<i>nn</i> 10.85 X
1	DOOR HINGE BOLT	\$	<i>nn</i> 10.85 X

Trans-cab Auto Services Pte Ltd

AAD1902-053

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHC 5564X

1	DOOR HINGE NUT RH	\$	na	14.60	} X
1	DOOR CHECK BOLT	\$	na	22.69	
1	DOOR CHECK NUT	\$	na	3.75	
1	DOOR LOCK SCREW L70Y	\$	na	6.12	
1	DOOR CATCH SCREW L70Y	\$	na	10.06	

TOTAL \$ 311.63 *61*

TOTAL PARTS \$ 24,692.76

LABOUR

Panel beating, knocking and straightening the necessary portion, remove and renewal of parts, adjust and realign the same	\$	4,500.00	<i>90d</i>
Putty and spray painting of the affected portion.	\$	4,200.00	<i>110d</i>
To rust-proofing of the affected areas.	\$	170.00	<i>9d</i>
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	380.00	<i>10d</i>
To check steering geometry and computer wheel alignment	\$	220.00	<i>6d</i>
To transfer of tire, rim and on wheel balancing.	\$	na	170.00 <i>X</i>
To Check Electrical Lighting Concerned.	\$	170.00	<i>20d</i>
To transfer of front door fittings, attachment and perform water seepage test.	\$	380.00	<i>6d</i>
To transfer of Rear door fittings, attachment and perform water seepage test.	\$	380.00	<i>6d</i>

TOTAL \$ 10,570.00

Over All Total \$ 35,262.76

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To resurvey before/after resurvey
- 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 provided
- is subject to final approval from Insurance Company

Signature: _____
Date: _____

LUMP SUM (REPAIR DAY)

15-DAYS

7 days



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

AUTO & GENERAL INSURANCE (S) PL

Ref : CS/AGI19002398/Kqd3n2

(BUDGET DIRECT INSURANCE)
190 CLEMENCEAU AVENUE #03-01
SINGAPORE SHOPPING CENTRESINGAPORE
239924

Date : 15-02-2019



Code : AGI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SGG 7679B	Veh. Inspected	SHC 5564X
Policy No.		Coverage (\$)	0.00
Claim No.	C10002626	Excess (\$)	0.00
Assign From	JUSTIN WONG	Assign Date	11/02/2019

2. Vehicle Particulars & Condition

Make & Model	RENAULT LATITUDE (A)	c.c	1995
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No.	VF1ABL15AUC279312	Colour	METALLIC WHITE / RED
Odometer	283133	Steering	IN ORDER
Brakes	IN ORDER	Modification	NIL
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	GOODYEAR	7 mm
L/H Front Tyre	215/60 R16	GOODYEAR	7 mm
R/H Rear Tyre	215/60 R16	GITI	8 mm
L/H Rear Tyre	215/60 R16	GITI	8 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE O/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	08/02/2019	Inspection Date	11/02/2019
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	7 Working Days
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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 5564X

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	DOOR PANEL FRT RH	BENT	2,844.66	2,844.66
1	DOOR HINGE UPPER RH	TO REPAIR SEE LABOUR	261.28	-
1	DOOR HINGE LOWER RH	TO REPAIR SEE LABOUR	300.55	-
1	DOOR CHECK FRT RH	SERVICEABLE	194.77	-
1	DOOR LOCK FRT RH	TO REPAIR SEE LABOUR	908.75	-
1	DOOR CATCH FRT RH	SERVICEABLE	131.23	-
1	DOOR HANDLE OUTER FRT RH	SERVICEABLE	477.76	-
1	DOOR HANDLE COVER FRT RH	SERVICEABLE	13.22	-
1	DOOR HANDLE MODULE FRT RH	SERVICEABLE	133.60	-
1	DOOR REGULATOR FRT RH	SERVICEABLE	505.19	-
1	DOOR REGULATOR MOTOR FRT RH	SERVICEABLE	796.46	-
1	DOOR REGULATOR GUIDE FRT RH	SERVICEABLE	120.97	-
1	DOOR PANEL REAR RH	BENT	2,844.66	2,844.66
1	DOOR GUIDE REAR RH	SERVICEABLE	176.82	-
1	DOOR HINGE UPPER RH	TO REPAIR SEE LABOUR	274.50	-
1	DOOR HINGE LOWER RH	TO REPAIR SEE LABOUR	300.55	-
1	DOOR CHECK REAR LH/RH L70Y	SERVICEABLE	203.06	-
1	DOOR LOCK REAR RH	TO REPAIR SEE LABOUR	908.75	-
1	DOOR HANDLE OUTER REAR RH	SERVICEABLE	126.49	-
1	DOOR HANDLE CAP REAR RH	SERVICEABLE	35.52	-
1	DOOR HANDLE SEAL REAR RH	SERVICEABLE	7.89	-
1	DOOR HANDLE COVER REAR RH	SERVICEABLE	13.22	-
1	DOOR HANDLE MODULE REAR RH	SERVICEABLE	133.60	-
1	DOOR REGULATOR REAR RH	TO REPAIR SEE LABOUR	1,135.10	-
1	DOOR REGULATOR MOTOR REAR RH	TO REPAIR SEE LABOUR	893.75	-
1	DOOR REGULATOR NUT REAR L70Y	SERVICEABLE	12.43	-
1	DOOR REGULATOR MOTOR SCREW REAR L70Y	SERVICEABLE	6.31	-
1	DOOR FINISHER REAR RH	SERVICEABLE	423.10	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	DOOR MOULDING REAR RH	SERVICEABLE	176.82	-
1	DOOR MOULDING CLIP L70Y	NOT NECESSARY	5.92	-
1	DOOR MOULDING SCREW L70Y	SERVICEABLE	6.91	-
1	DOOR CASING REAR RH	SERVICEABLE	1,509.06	-
1	DOOR WATER SHIELD REAR RH	SERVICEABLE	30.39	-
1	DOOR CASING CLIP	NOT NECESSARY	12.63	-
1	DOOR CASING LIGHT L70Y	SERVICEABLE	48.74	-
1	DOOR FINISHER INNER REAR RH	SERVICEABLE	323.44	-
1	DOOR FINISHER BRACKET INNER REAR RH	TO REPAIR SEE LABOUR	46.97	-
1	DOOR FINISHER BRACKET INNER REAR RH	TO REPAIR SEE LABOUR	20.33	-
1	DOOR FINISHER BRACKET INNER REAR RH	TO REPAIR SEE LABOUR	20.33	-
1	DOOR FINISHER BRACKET INNER REAR RH	TO REPAIR SEE LABOUR	20.33	-
1	DOOR GRAB HANDLE REAR RH	SERVICEABLE	210.96	-
1	DOOR BLIND REAR RH	SERVICEABLE	741.80	-
1	DOOR WEATHERSTRIP REAR RH	SERVICEABLE	410.66	-
1	DOOR SEAL REAR RH	SERVICEABLE	162.02	-
1	DOOR GLASS RUNNER SEAL REAR RH	SERVICEABLE	229.31	-
1	DOOR WAIST SEAL OUTER REAR RH	SERVICEABLE	334.69	-
1	DOOR WAIST SEAL INNER REAR RH	SERVICEABLE	115.64	-
1	DOOR MIRROR ASSY RH	SERVICEABLE	1,483.40	-
1	ROCKER PANEL INNER GARNISH RH	TO REPAIR SEE LABOUR	466.51	-
1	ROCKER PANEL INNER RH	TO REPAIR SEE LABOUR	1,024.79	-
1	ROCKER PANEL CENTER RH	TO REPAIR SEE LABOUR	990.25	-
1	FENDER PANEL REAR RH	BENT	3,299.13	3,299.13
1	FENDER PANEL INNER TRIM REAR	SERVICEABLE	671.45	-
1	WHEELARCH REAR RH	SERVICEABLE	543.47	-
	LESS 10% DISCOUNT		-2,709.01	-898.85
			24,381.13	8,089.60
	SPECIAL NETT ITEMS			
1	FRONT DOOR STICKER "TRANS-CAB" (SN)	NECESSARY	80.00	60.00
1	FRONT DOOR STICKER "CHASSIS" (SN)	NECESSARY	50.00	15.00

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	REAR DOOR STICKER "6555-3333" (SN)	NECESSARY	80.00	60.00
1	DOOR CHECK BOLT (SN)	NOT NECESSARY	22.69	-
1	DOOR GUIDE SCREW (SN)	NOT NECESSARY	10.85	-
1	DOOR HINGE BOLT (SN)	NOT NECESSARY	10.85	-
1	DOOR HINGE NUT RH (SN)	NOT NECESSARY	14.60	-
1	DOOR CHECK BOLT (SN)	NOT NECESSARY	22.69	-
1	DOOR CHECK NUT (SN)	NOT NECESSARY	3.75	-
1	DOOR LOCK SCREW L70Y (SN)	NOT NECESSARY	6.12	-
1	DOOR CATCH SCREW L70Y (SN)	NOT NECESSARY	10.06	-
			311.61	135.00
	LABOUR			
	PANEL BEATING,KNOCKING AND STRAIGHTENING THE NECESSARY PORTION,REMOVE AND RENEWAL OF PARTS,ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF DOOR HINGE UPPER RH,DOOR HINGE LOWER RH,DOOR LOCK FRT RH,DOOR HINGE UPPER RH,DOOR HINGE LOWER RH,DOOR LOCK REAR RH,DOOR REGULATOR REAR RH,DOOR REGULATOR MOTOR REAR RH,DOOR FINISHER BRACKET INNER REAR RH,ROCKER PANEL INNER GARNISH RH,ROCKER PANEL INNER RH AND ROCKER PANEL CENTER RH.		4,500.00	900.00
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		4,200.00	1,100.00
	TO RUST-PROOFING OF THE AFFECTED AREAS.		170.00	90.00
	TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH, FITTINGS AND OTHER,TO ENABLE REPAIR.		380.00	100.00
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.		220.00	60.00
	TO TRANSFER OF TIRE,RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	-
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
	TO TRANSFER OF FRONT DOOR FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.		380.00	60.00
	TO TRANSFER OF REAR DOOR FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.		380.00	60.00
			10,570.00	2,390.00
	GRAND TOTAL		35,262.74	10,614.60
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			8,500.00

Report Ref No. CS/AGI19002398/Kqd3n2



Report Ref No. CS/AGI19002398/Kqd3n2

KONG SENG CHEONG

Licensed Appraiser

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