

140000

INS. CASE OWNER:

Linet

CC 6/EQ1900

2571, A #139

LKK
IDAC

Surveyor:

Adrian

DOI:

ASSIGNMENT

12/2/14

Date / Time:

12/2/14

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GBE 7043E

Name of Insured:

CLEAN EVOLUTION VIL

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

4/2/14

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

WOL 1000 mm

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

DMLPWA 18-001060

Toyota

Turn of Bend where K0 & 6644444444444444

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SUT 8749u

INSRS:
WSP:
Tel:
Liability:
RMKS:

Leang

INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time

26/1/14

Spoke to OIB (19/10) is the boss, informed about TP claim and video footage, he dispute that TP also change lane and without giving way, he also dispute that TP claim high quantum in B2 claim, explain Eg will handle the B2 claim, based on the video footage, liability is not in his favor, he is not major, he 100% at fault, send letter to OIB.

TP video → PK folder.

offer \$3500.00 (pending acceptance).

Settle @ \$3500.00 & File Pass Admin to close *

2/10

STAGE	DATE / PIC	
Non-Reporting 1st (1st):		
Non-Reporting 1st (2nd):		
Non-Reporting 1st (Final):		
Notification 1st (if non-pickup):		
Call OE:		
After call 1st to OE: <u>31/3/2009</u>	<i>car 24/9/09</i>	
Documentation Check List: Handler	Typist	
Notification 1st (if non-pickup)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
After call 1st to OE:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Authorisation To Act:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Release Voucher:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Final Repair Bill:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Car Rental Invoice:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Towing Invoice:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LTA / GLA:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Medical Bill:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PIR:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mandate/Reject Instruction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LOD:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Payment Breakdown Form:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Post-Repair Photos:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

46

SS 3100.00

(4 days)

Reduction: \$3600.00

FINAL SETTLEMENT

Date/Time:

Confirm with: Leang

Email:

Call:

Final Liability:

%

100

Repair Cost:

SS 3100.00

Loss of Rental (LOR):

SS

400.00

(4 days)

x \$100

Loss of Use (LOU):

SS

-

(5 days)

Loss of Income (LOI):

SS

-

(5 days)

LOR only

☒

LOU only

☐

LOR + LOU

☐

LOR + LOI

☐

[Tick only one]

GL/LTA Search

SS

-

Medical:

SS

-

Disbursement:

SS

-

(e.g. Tow/ Independent)

Legal Cost

SS

-

Total:

SS 3700.00

Global Sum SS:

FINAL PAYMENT

Date/Time:

Confirm with:

Email:

Call:

Payee 1:

SS

3500.00

Name 1:

Leang Automotive

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3:

COPY SENT

OK
7/1090286576
Leang

Adrian

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Leang

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: 4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SLT8349U Yr Regn: 2017, NovType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mercedes 3 c.c. 1496Colour: Blue A/C: Insured / Std / Nil / NASp. Reading: 45679 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: JM6BN22A814015 7250Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16R: 205/60R16

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 12/02/19Survey held at LeangDes. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop orFront N/S

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

TPA Rep EQUS \$3100/- (Red = \$3600.64 / 547.)

mv:

pv:

Nett:

Date/Time, File Pass to?

Date/Time, File Return to?

1)	2)
3)	4)
5)	6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Basic & Add.

S + RS, SI

Photos

Others

TOTAL

Date:

Subject: SLT83494.

Date:

Mazda 3

JM6BN22A8H0157250

Front Bumper	Detached	1031.70	✓
Front Bumper Clips	new	30	✓
Front Bumper Side Holder LH	Detached	38	✓
Headlamp LH	changed	1157.90	✓
Front Grille	changed	325	✓
Front Grille Logo	new	68.80	X
Front LH Fender	Dented.	334	✓
Front LH Fender Inner Shield	torn	129	✓
Front LH Fender Inner Shield Clips	new	30	✓
Front LH Wheel Rim	cut	850(SN)	550(SN)
Front LH Shock Absorber	} NP new	287	X
Front LH Wheel Hub c/w Bearing		325.40	X
Front LH Lower Arm		485	X
Front LH Knuckle Arm		384	X
		3075.60	S.N. 1550
		2460.48	

Panel Beating	800	400	
Spray Painting	800	400	
Wiring	50	30	
To perform wheel alignment	150	80	910
To dismantle front Undercarriage	350	X	

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 item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

total: 3920.48
L/S: 3.1K.
04 Days.

46700.64

Shu Pei (LKKAuto)

From: Janet Tan <janet.tan@eqinsurance.com.sg>
Sent: Friday, 22 February 2019 9:42 AM
To: Shu Pei (LKKAuto)
Cc: Admin A; Poh Kin (LKKAuto)
Subject: RE: Direct Settlement - Accident Involving GBE7043E (OI : EQI - TBA) AND SLT8349U (TP : LKK REF - CC6/EQI19002531/Afb3) on 04.02.2019
Attachments: TP GIA REPORT.PDF; SAS2556153.PDF

Dear Shu Pei,

OI report as attached.

Regards,

Janet Tan
Senior Executive | Claims



EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6496 9032 | tel 65 6223 9433 ext 032 | fax 65 6223 4190
www.eqinsurance.com.sg

A Member of Citigroup

Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender.

From: Shu Pei (LKKAuto) [mailto:shupeil@lkkauto.com]
Sent: Tuesday, February 12, 2019 6:26 PM
To: Janet Tan <janet.tan@eqinsurance.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; Poh Kin (LKKAuto) <pohkin@lkkauto.com>
Subject: Direct Settlement - Accident Involving GBE7043E (OI : EQI - TBA) AND SLT8349U (TP : LKK REF - CC6/EQI19002531/Afb3) on 04.02.2019

WITHOUT PREJUDICE

Dear Sir / Madam,

We refer to the above matter.

We have inspected TP vehicle SLT 8349U at M/s Leang Automotive on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:
- TP's GIA report

Please be informed that estimated cost of repair and preliminary advice is not ready yet.

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Poh Kin and he can be contacted at DID: 6841-2132.

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Auto
Consultants
Pte Ltd

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

Our Ref: CC6/EQ119002531/Afb3

31 JULY 2019

OCEAN ELECTRICAL PTE LTD
50 TUAS AVENUE 11
#03-25 TUAS LOT
SINGAPORE 639107

Dear Sir/Madam,

**ACCIDENT INVOLVING GBE 7043E AND SLT 8349U ALONG/AT JUNCTION OF
BENDEMEER RD AND GEYLANG BAHRU ON 04/02/2019**

We refer to the above accident where we are acting for EQ Insurance Company Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

We have received a claim from **SLT 8349U** against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

If you have evidence/information to proof that we should not settle the third party claim, kindly let us have them in writing within the next **10 days** i.e. by **13/08/2019**, after we shall proceed with negotiation with Third Party claimant on the without prejudice basis and any settlement should not bind any claims whatsoever by you/your driver against the other party's insurer arising from this particular accident.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Poh Kin, Chong
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: pohkin@lkkauto.com

c.c. *EQ Insurance Company Ltd*
(Motor Claims Dept)

Report Remarks Entry - CC6/EQI19002531/Awb3

Remarks

Remarks

Add

Remarks 1	By	On
<input type="checkbox"/> SLT 8349U : GBE 7043E	LSP	12/2/2019 5:12:59 PM
<input type="checkbox"/> EST : \$ --- SUR : LWP --- WKSP : LEANG AUTOMOTIVE	LSP	12/2/2019 5:13:08 PM
<input type="checkbox"/> FILE PASS TO PK	LSP	25/2/2019 7:45:53 PM
<input type="checkbox"/> PENDING EST	LSP	25/2/2019 7:46:05 PM
<input type="checkbox"/> received video footage	CPK	12/3/2019 8:24:39 AM
<input type="checkbox"/> TP DOCS IN VIA FAX**PASS TO POH KIN	CHT	27/3/2019 5:22:53 PM
<input type="checkbox"/> LOD in by fax	CPK	1/4/2019 11:32:05 AM
<input type="checkbox"/> TP CALLED IN CHASING FOR OFFER	CHT	4/4/2019 10:54:06 AM
<input type="checkbox"/> 26/07/2019, spoke to OID (Mr Loi), he is the owner of the company, informed TP claim and video footage, he dispute that TP also changing lane and without giving way, he also dispute that TP claim high quantum in BI claim, explain to him EQ will handle BI claim, based on the video footage, liability is not in his favor, he is not agree 100% at fault, agree to let insurance handle the matter, also mention that NCD already affected due to last year accident.	CPK	30/7/2019 11:51:52 AM
<input type="checkbox"/> send letter to OI, 50/50 format	CPK	30/7/2019 11:53:24 AM
<input type="checkbox"/> file pass to SU, for send letter to OI	CPK	30/7/2019 11:53:41 AM
<input type="checkbox"/> Sent Letter To OI***File Pass Back POHKIN	STU	30/7/2019 3:04:30 PM
<input type="checkbox"/> FILE TRANSFER TO VIVIAN FROM PK	CPK	30/7/2019 3:44:05 PM
<input type="checkbox"/> to review the matter	CPK	30/7/2019 3:44:42 PM

EQ Insurance Company Limited

Attn: Motor Claims Dept

Dear Sir/ Madam

ACCIDENT INVOLVING VEHICLE NO SLT 8349U & GBE 7043E ON 04/02/2019

We understand that you are the insurer of GBE 7043E vehicle.

We are instructed by the owner of A VIJAYAKUMARI to write, negotiate and settle the claim on their behalf for the abovementioned accident. We therefore propose to claim from you as follows: -

1.	Cost of repair	S\$ 3,100.00
2.	Loss of Rental (S\$120.00 x 4days)	S\$ 480.00
3.	LTA Search fee	S\$ -

TOTAL	<u>S\$ 3,580.00</u>
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Please let us have your reply soonest possible.

Thank you.

Yours faithfully

EO Insurance Company Limited
Attn: Motor Claims Dept

Dear Sir/ Madam

ACCIDENT INVOLVING VEHICLE NO SLT 8349U & GBE 7043E ON 04/02/2019

We understand that you are the insurer of GBE 7043E vehicle.

We are instructed by the owner of A VIJAYAKUMARI to write, negotiate and settle the claim on their behalf for the abovementioned accident. We therefore propose to claim from you as follows: -

1.	Cost of repair	S\$ 3,100.00
2.	Loss of Rental (S\$120.00 x 4days)	S\$ 480.00
3.	LTA Search fee	S\$ -

TOTAL S\$ 3,580.00

Please let us have your reply soonest possible.

Thank you.

Yours faithfully





Auto
Consultants
Pte Ltd

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

Our Ref: CC6/EQI19002531/Agb3

24 SEPTEMBER 2019

OCEAN ELECTRICAL PTE LTD

50 TUAS AVE 11

#03-25/26

SINGAPORE 639107

Dear Sir/Madam,

ACCIDENT INVOLVING GBE 7043E AND SLT 8349U ON 04/02/2019

We refer to the above accident. We are the Appointed Surveyor and Loss Adjuster Company by your Motor Insurer (EQ INSURANCE COMPANY LIMITED) to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

This is to inform you that we received a Third Party Claim from SLT 8349U.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Your full co-operation in the handling of the claim is required and kindly submit the following to ceciliachong@lkkauto.com within 10 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Driver's driving license or foreign driving license (if any)
- Accident Video Footage
- Employment Letter/ Authorisation letter from your company

Please call us if you have further queries.

Yours faithfully,

CECILIA CHONG

Case Handler

DID: 6749 4274

FAX: 6741 4108

EMAIL: ceciliachong@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

Date: _____

To: M/s Leang Automotive
No. 1 Kaki Bukit Avenue 6
#01-68
Singapore 417883

LETTER OF AUTHORITY & INDEMNITY

I/we A VIJAYAKUMARI NRIC No./ Co Registration No. S168/558F
of (address) BLK 34 WHAMPOA #06-21 (S) 330034
the registered owner (or his/her/their/agent) of motor vehicle registration no. SL78349U
hereby authorise M/s Leang Automotive ("the Repairer") to commence repairs to my/our
vehicle and to forward the claim for inter alia the costs of repairs to the owner/insured of the
Third Party responsible for the said accident on (date) 4/2/2019 involving motor vehicle
nos 4BE7043E along SENDEREER ROAD. I further authorise M/s
Leang Automotive to sign and execute all documents in my name including but not limited to
the Discharge Voucher in connection with the claim against the Third Party

However, if the third party rejects liability for whatever reasons and/or if the claim is
reverted to my/our insurers and my/our insurers do not settle the repair costs and
disbursements under my/our own insurance policy, I/we will be fully responsible for the
repair costs and disbursements.

I also agree that if I do not fully co-operate in the Third Party claim, I will be
responsible for any losses incurred by my Repairer.

My/our vehicle is repaired by the Repairer on my/our own free will and without any
threat, inducement and/or promise.

In the event that the Repairer is compelled to enforce this undertaking, I/we agree that
I/we shall pay for the legal costs incurred by the Repairer on a solicitor and client full
indemnity basis.

A Vijayakumar
Signature/ Co. Stamp

This Discharge Voucher applies only to the claimant's claim
for property damage and will not affect the personal
injuries claim and/or uninsured losses claim on a later date.

Further, the settlement terms herein shall not be used as
evidence to prejudice the claimant's personal injuries claim
and/or other uninsured losses claim arising out of the
subject matter in this action.

No. 1360

Auto Bay @ Kaki Bukit 1 Kaki Bukit Ave 6 #01-68 Singapore 417883
Tel: 6909 3048 Fax: 6909 3046

Vehicle No: SLT8349U

Vehicle Model: mazda 3

Date: 25-3-2019

For LEANG AUTOMOTIVE



DAWN ENTERPRISES

21 Seletar West Farmway 1
Singapore 798125
Tel: 63832661 Fax: 64842836
Reg No. 430058/00D

Leong Auto

Nº 36457

RENTAL AGREEMENT

DATE

11/2/19

HIRER'S PARTICULARS

Name A. Vijaya Kumari

Address Blk 34 Whampoa West

#06-21 S(330034)

IC or Passport No. S1681558F Country S'pore

Occupation Spencer

Date of Birth 04/03/1965 Age 54

Driving Licence No. _____ Date Passed _____

Tel: (HP) _____ (Residence) _____

DRIVER'S PARTICULARS

Name Ravindran

Address Blk 34 Whampoa West

#06-21 S(330034)

IC or Passport No. S9444507E Country S'pore

Occupation _____

Date of Birth 27/12/1994 Age 24

Driving Licence No. _____ Date Passed _____

Tel: (Office) 91813824 (Residence) _____

IMPORTANT NOTES:

1. No Insurance Coverage if the driver is below 24yrs old or less than 2 years driving licence.
2. This vehicle is licensed to carry 2085 passengers only.
3. Hirer is liable to pay first \$ 2085 as excess all claims any accident plus loss of earning while damaged vehicle is under repair.
4. For usage to Malaysia subject to higher excess all claims of \$35,000.00 and different rental rate.
5. Please notify our office should there be any accident involving this hired vehicle within 24 hrs.
6. No refund will be given for vehicle returns early.
7. No refund will be given for petrol left in vehicle.
8. Hirer is liable to pay all parking fee and traffic summonses.
9. Vehicles to be return during office hour only.
10. No Service on Public Holiday and Sunday.

CHARGES

A Day at \$ 120.00	per days	\$ 480.00
Day at \$	per week	
Day at \$	per month	
TOTAL AMOUNT		\$ 480.00
AMOUNT PAID		\$ 480.00
BALANCE DUE		
Days Extension From	To	
Amount Deposit (refundable) \$		

SCHEDULE

SKF 5357B 7/11/19 MODEL

Date	Time	Mileage
<u>11/2/19</u>	<u>3:40pm</u>	
<u>15/2/19</u>		

FROM

11/2/19

TO

15/2/19

I/we have read and understood the terms and conditions above and hereby agreed to abide

Hirer's Signature

Driver/Guarantor's Signature

DAWN ENTERPRISES



DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1

SINGAPORE 798125

TEL: 6383 2661 FAX: 6484 2836

REG. NO. 430058/000

No. 19561

Date 15/2/19

OFFICIAL RECEIPT

Received from

A. Vijaya Kumar

the sum of Dollars

four hundred eighty only

being Payment Of

S\$ 535.78

15/2/19 - 15/2/19

\$ 480/-

Cash/Cheque No

DAWN ENTERPRISES

[Signature]



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

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

To : M/s EQ INSURANCE COMPANY LTD

Date: 15/10/2019

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	GBE 7043E (Insd Veh)	Your Ref. No. : DMCPHQ18-001060
	SLT 8349U (TP Veh)	Our Ref. No. : CC6/EQI19002531/Agb3q2
Date of Accident	4/2/2019	

Liability	100%	
Final Repair Cost	: \$ 3,100.00	
Loss of Use	: \$	days
Rental (If any)	: \$ 400.00	4 days
Others:	: \$	
	: \$	
	3,500.00	
Final Settlement Sum	: \$ 3,500.00	
Remarks	:	

Payment Instruction: Payee's Breakdown		
1	LEANG AUTOMOTIVE	: \$ 3,500.00
		: \$

JOANNE LEE

LKK Auto Consultants Pte Ltd



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

EQ INSURANCE COMPANY LTD

Ref : CC6/EQ19002531/Agb3q2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 15-10-2019



Code : EQ1

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBE 7043E	Veh. Inspected	SLT 8349U
Policy No.	DMCPHQ18-001060	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	12/02/2019

2. Vehicle Particulars & Condition

Make & Model	MAZDA 3	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	JM6BN22A8H0157250	Colour	BLUE
Odometer	45679	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	TOYO	6 mm
L/H Front Tyre	205/60 R16	TOYO	6 mm
R/H Rear Tyre	205/60 R16	TOYO	6 mm
L/H Rear Tyre	205/60 R16	TOYO	6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT N/S PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	04/02/2019	Inspection Date	12/02/2019
Survey held at	LEANG AUTOMOTIVE BLK 1 KAKI BUKIT AVE 6 #01-68 AUTOBAY@ KAKI BUKIT SINGAPORE 417883		

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:	4 Working 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

Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SLT 8349U

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
REPLACEMENT OF PARTS				
1	FRONT BUMPER	DEFORMED	✓ 1,031.70	1,031.70
1	FRONT BUMPER CLIPS	NECESSARY	✓ 30.00	30.00
1	FRONT BUMPER SIDE HOLDER LH	DAMAGED	✓ 38.00	38.00
1	HEADLAMP LH	CRACKED	✓ 1,157.90	1,157.90
1	FRONT GRILLE	CRACKED	✓ 325.00	325.00
1	FRONT GRILLE LOGO	NOT NECESSARY	✓ 68.80	-
1	FRONT LH FENDER	DENTED	✓ 334.00	334.00
1	FRONT LH FENDER INNER SHIELD	TORN	✓ 129.00	129.00
1	FRONT LH FENDER INNER SHIELD CLIPS	NECESSARY	✓ 30.00	30.00
1	FRONT LH SHOCK ABSORBER	NOT NECESSARY	✓ 287.00	-
1	FRONT LH WHEEL HUB C/W BEARING	NOT NECESSARY	✓ 325.40	-
1	FRONT LH LOWER ARM	NOT NECESSARY	✓ 485.00	-
1	FRONT LH KNUCKLE ARM	NOT NECESSARY	✓ 384.00	-
	LESS 20% DISCOUNT		-	-615.12
			4,625.80	2,460.48
SPECIAL NETT ITEMS				
1	FRONT LH WHEEL RIM (SN)	CUT	✓ 850.00	550.00
			850.00	550.00
LABOUR				
	PANEL BEATING.		✓ 800.00	400.00
	SPRAY PAINTING.		✓ 800.00	400.00
	WIRING.		50.00	30.00
	TO PERFORM WHEEL ALIGNMENT.		✓ 150.00	80.00
	TO DISMANTLE FRONT UNDERCARRIAGE.	NOT NECESSARY	✓ 350.00	-
			-	-
			-	-
			-	-
			2,150.00	910.00
GRAND TOTAL			7,625.80	3,920.48

Report Ref No. CC6/EQ19002531/Agb3q2



RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			3,100.00
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Report Ref No. CC6/EQI19002531/Agb3q2

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.

Joanne Lee (LKK Auto)

From: Joanne Lee (LKK Auto) <report@lkkauto.com>
Sent: Wednesday, 16 October 2019 3:52 PM
To: 'eqiprs@eqinsurance.com.sg'
Cc: 'CeciliaChong@lkkauto.com'
Subject: TP Direct Settlement - Accident Involving GBE 7043E (OI) and SLT 8349U (TP) on 04/02/2019
Attachments: LKK REPORT & PHOTO.pdf; TP DS SUPPORTING DOCUMENT.pdf

Dear Sir/Madam,

Please be informed that the above-mentioned case had been settled.

Enclose herewith final report & relevant documents for your necessary action please.

Thank you.

Best Regards,

JOANNE | Reports

LKK Auto Consultants Pte.Ltd.

Phone: 6256-3561 Ext.111 Fax: 6741-4108 email: report@lkkauto.com

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