ASS. REC. BY:	REF: es 3pf 19003193/ Fgd3 (3pecial Instruction)
Sarveyor:	ASSIGNMENT (Office)
From (Person): <b>Fru</b> Estimated Cost:	Bill to:
To Inspect Vehicle No:	ES/OD RES/EVA/INV/MY7CS OLC 2101C
at Workshop m/s	Cheny Hoe Motor Tel: 648/2001
of	No:10 AME Ind. park 2A # 01-04
Policy No:	Claim No: AEMD/105/004/2019/005
Sum Insured:	Excess:
Make of Veh: (Client's Record)	D.O.A. 15/2/2019
CA / REV / REP. / Date/Time: 2.47pm	REV 24 HRS  11.O.D. Endorsement:  Description Vehicle IN(OH)
	Instruction ( ) Estimate
88	31276->
TP 1	094B ×
	-2k

ASS. REC. BY:	REF: J'Y'		
Kenneth	A	SSIGNMENT	
From:	Date:		
Estimated Cost:		Veh No: STS 3127 E Yr Regn: O8, O	19
OD LAP I WS I TP RES	/ OD RES / EVA / INV / MV	M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /	
To Inspect Vehicle No:		Truck / Trailer or	
at Workshop m/s	Cheny / for	Make: Itanda Civir c.c 175	9
of	Am/o 1 sur	Colour M.R. White A/C: Insured / Std / NI / NA	
Insured:	7 1111/1	Sp.Reading 198721 T/Radio: Insured / Std / NI / N	4
Policy No.		Eng/No:	
Claims No.	5,	_ CNO: JIAMEDIG3095202	182
Sum Insured:	Excess:	Gen. Cond. Good / Fair / Poor / Burnt	
(Client's Record)		Steering: Inorder / Jammed / Leaked / Burnt or	
Make of Veh:		Brake: Inorder / Jammed / Leaked / Burnt or	
		Modi: Nii / STRIm / STD A/Rim or	-
(Policy Condition)	1 R	Tyre Size: F: 275/407R18	
Remark: The veh had con	nmenced its N/S O/S	R:	
	e of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /	
Bal. or Market Value:		TOYO/YOKO or	
IDAC Accident Rport:	Consistent? : Yes or No	Front Rear	
GIA / PR Seen:	Consistent?: Yes or No	R/Bal. 6 mm R/Bal. 6 mm	
Est. Repairs: 02	2 days Res.: Yes or No	L/Bal. 6 mm L/Bal. 6 mm	
	% 3 Val.: Yes or No	D.O.A. 15/2/19 D.O.I. 5/3/19	
CA / REV / REP. / :	The state of the s	Survey held at	_
	Vehicle: IN / OUT	Des. of Damages Frt Rear / O/S / N/S / U/C / Rooftop or	_
	on Contacted:		
Date / Time Action / In		The U/C / Chassis frame / Body Structure affected due to collision.	_
File p	os to		
(led to	8900 1 COR range :	8900 - \$1100).	E
Crac P	402.17, 33%)		5
	REC	ETVED 1-1 MAR 2019	
			34
Date/Time, File Pass to?	: Prell. Report		
11 11/3 Marst	First D	ays Of Repair:	
Date/Time, File Return to?	. r mai Report Re	Survey Fee: Survey Fee: 280	
2)	Add Fee:	Transportation:	
	Add ree:	Site Insp (\$ )_s + RSsi	
Report Format:	70	: Interview (\$ ) Fixotos	
Lump Sum / LB.1: (S	900	Tech Invs (\$ ): Others	
/		Weekend (\$	
		10TAI 780	

# Nivitha (LKK Auto)

From:

Frankie THAY (SPF) < Frankie\_THAY@spf.gov.sg>

Sent:

Monday, 25 February 2019 2:41 PM

To:

Veron Chen (LKKAuto); assignments

Cc:

Olivia Lau (LKKAuto); Hafizul Farhan RAHMAT (SPF)

Subject:

RE: Pre-Repair Inspection for vehicle SJS3127E (RTA with TP 1094 on 15/2/2019)

Your reference: SJS 3127E

Our reference: AEMD/105/009/2019/005

Veron,

Please conduct a Pre-Repair Inspection for vehicle SJS3127E at the following workshop.

Cheng Hoe Motor Pte Ltd No 10, Ang Mo Kio Industrial park 2A #01-04, AMK Autopoint Singapore 568047

Contact person: Dorlyn at Tel: 64812001 for appointment.

### Thanks.

Frankie Thay (Mr)
Safe Driving Manager
Automotive Engineering & Management Division
Police Logistics Department
Singapore Police Force
DID: (65) 6478 4841 | FAX: (65) 6478 4848





WARNING "Privileged/Confidential information may be contained in this message. If you are not the intended addressee, you must not copy, distribute or take any notify the sender immediately if you receive this in error."

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	0788B	
Vehicle No.:	SJS3127E	
Vehicle to be Exported:	No	
Intended Deregistration Date:	18 Feb 2019	
Vehicle Make:	HONDA	
Vehicle Model:	HONDA CIVIC 1.8L 5AT	
Primary Colour:	White	
Manufacturing Year:	2008	
Engine No.:	R18A14013414	
Chassis No.:	JHMFD16309S202192	
Maximum Power Output:	103.0 kW (138 bhp)	
Open Market Value:	\$26,481.00	
Original Registration Date:	08 Aug 2009	
First Registration Date:	08 Aug 2009	
Transfer Count:	1	
Actual ARF Paid: Intended PARF Rebate Details	\$26,481.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	07 Aug 2019	
PARF Rebate Amount: Intended COE Rebate Details	\$13,240.00	
COE Expiry Date:	07 Aug 2019	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	10	
QP Paid:	\$18,501.00	
COE Rebate Amount:	\$870.00	
Total Rebate Amount:	\$14,110.00	

The information contained herein is correct as at 18 Feb 2019

ОК

### 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 <u>truthful and accurate</u> 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.

ACCI	DEV.	т стл	4 - 1.7	1 - 1 - 1
ACC	DEN	T STA	. = W	

Date Of Report

18/02/2019 13:47

Date Of Accident

15/02/2019 19:40

Exact Location Of Accident

T/JUNCTION OF YIO CHU KANG RD & HOUGANG AVE 2

Country/State of Loss

SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJS3127E

Insured/Policyholder

Name Of Registered Owner

LIM JEREMIAH

NRIC No

S9000788B

Email Address

LIM\_JEREMIAH@HOTMAIL.COM

Mobile Phone No

(LOCAL) +65-96746074

Alternative Phone No

OTHERS-96746074

**Vehicle Particulars** 

Manufacturer

HONDA

Model

CIVIC-1.8 L 5AT (A)

Exact Purpose for which vehicle was being used at

time of accident

PTE USE

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

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

Cover Note Number

DMPCSN3003951900 08/02/2019 - 07/02/2020

Driver

Name of Driver

LIM JEREMIAH

NRIC No

S9000788B

Date Of Birth

12/01/1990

Occupation

INDOOR

Date Of Driving Pass

INDOOR

Driving Experience

19/07/2011

7 YEARS AND 6 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-96746074

Fax Number

Contact Number

OTHERS-96746074

**EMail Address** 

LIM\_JEREMIAH@HOTMAIL.COM

Address

BLK 140 SERANGOON NORTH AVE 2 #09-34

Postcode

550140

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

YES

Was any body injured in the Accident? Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

2

NAME:

: PANG XIU WEN

Passenger 1

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station Police Station Name

SERANGOON NORTH NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709, POSTCODE:

550108, COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-2849999 - FAX NO: 63431742

Was notice of intended Prosecution given?

If Yes, against whom?

NO

# Circumstances of Accident

REFER TO POLICE REPORT NO. T/20190215/2203

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

TP1094B

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Name RIDER Approximate Age Injuries Sustain Injured person in which vehicle? TP1094B Were seat belts worn? Was this injured conveyed to hospital by ambulance? Address Postcode

# SKETCH PLAN

VEHICLE NO.: SJS 3127E
INSURER : (hing
DATE & TIME: 15/02/19 (0 194)

### 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
  - 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: 12/12/10/0

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Oentre Personnel's Signature

Name: DIVILLA (ALA

RIC/FIN No .: V

18/02/19

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Vehicle No: SJS3127E (China)  Date & Time: 15/02/2019 (2) 1940 (Ular/dry)  Pofer to police report no: 7/20190215/2203.	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Vehicle No: SJS3127E (China)  Date & 71me: 15/02/2019 (0) 1940 (1/20/dng)	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Vehicle No: SJS3127E (China)  Date & 71me: 15/02/2019 (0) 1940 (year/dry)	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT  Vehicle No: SJS3127E (Ching)  Date & 71me: 15/02/2019 (0) 1940 (1/20/dng)	SKETCH PLAN	A: SJS 3127 (W 1 passengs Pang Xiu Wen
Vahicle No: SJS3127E (Ching) Date & Time: 15/02/2019 (0 1940 (1/ear/dne)	Vahicle No: SJS3127E (Ching) Date & Time: 15/02/2019 (0 1940 (1/ear/dne)	Vahicle No: SJS3127E (Ching) Date & Time: 15/02/2019 (0 1940 (11ear/dne)	Vahicle No: SJS3127E (Ching) Date & Time: 15/02/2019 (0 1940 (lear/dre)	TO THE PART OF THE	ugana
				Vanicle No: SJS3127E ((hing) Date & Time: 15/02/2019 (0) 1940 (1/ear/d	J
Note: Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.  DECLARATION  I/We declare the foregoing particulars are true in every respect.	under your own comprehensive policy. Please check with your policy for more information.  DECLARATION	under your own comprehensive policy. Please check with your policy for more information.  DECLARATION		Policytolder's Signature Driver's Signature Rep	porting Centre Personnel's Signature





1 of 3

Report No. T/20190215/2203

Police Station Of Origin: Serangoon North NPP 108 Serangoon North Ave 1 #01-709 SINGAPORE 550108

Tel No: 1800-2849999

# REPORT OF A TRAFFIC ACCIDENT

	ne Report N 119 22:08	flade:	Vide Report No.: F/20190215/0135	Station Diary No.: 47
Informa	nt's Partice	ulars		
Name of LIM JER	Informant: EMIAH		Address: APT BLK 140 SERANGOO SINGAPORE 550140	ON NORTH AVENUE 2 #09-34
ID Type NRIC NO	/ ID No.: D / S900078	38B	Contact No.: Home/Office:	Mobile: 96746074
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age: 29	Date of Birth: 12/01/1990	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupat research			Driving Licence Information Class: 3	n: Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/02/2019 19:4	Type of Location X-Junction
Traffic junction	NORTH AVENUE 1 of serangoon north aver	nue 1 neat to Al Ist	qamah mosque	n
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Light
Two Way				

Details of V	ehicle Involv	ed				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJS3127E		HONDA	HONDA CIVIC 1.8L 5AT	White		1
TP1094B	TRAFFIC POLICE MOTOR					0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Serangoon North NPP 108 Serangoon North Ave 1 #01-709 SINGAPORE 550108 Tel No: 1800-2849999

3 of 3 Report No. T/20190215/2203

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:	Signature Of Informant:
Sgt 3 MUHAMMAD ASYRAF BIN ARIS	
Signature Of Interpreter: Not applicable	Date/Time: 15/02/2019 22:08
	13/02/2019 22:00
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
SI YEO CHUN JIAN	and the second s
Contact No.: 65476213	5.1151
Authentication Stamp NP168	Signature:
	4
	Singaport Police Force





2 of 3

Report No. T/20190215/2203

Police Station Of Origin: Serangoon North NPP 108 Serangoon North Ave 1 #01-709 SINGAPORE 550108 Tel No: 1800-2849999

### CONTINUATION OF REPORT

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJS3127E	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN30039519 00	08/02/2019	07/02/2020

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	destriar	Cross	ing: NA
Driver						
Name	LIM JEREMIAH			ID No		S9000788B
Related Vehicle	SJS3127E			Conta	ct No.	96746074
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

### Brief Details.

On 15.02.2019 at around 1945hrs, me and my wife was in our vehicle SJS3127E stationery at the junction of Serangoon north avenue 1 near to the Al Istiqamah mosque as it was red light. Suddenly, there was a traffic police motor TP1094B which hit onto our front bumper and flung across the road. We quickly alighted and rendered to assist the police officer which was conscious on the floor. I called for ambulance which arrived a while later. Traffic police officer came down to the scene and they took my car's SD card camera. I was given NP122 form and was advised to lodge an accident report.

# **Cheng Hoe Motor Pte Ltd**

Blk 1019, Yishun Industrial Park A #01-374/382, Singapore 768761 TEL: 67556142 (YIS) FAX: 67557719 (YIS) Email: chmotor@singnet.com.sg GST:201001158E RCB NO:201001158E

M/S: SINGAPORE POLICE FORCE -Automotive Engrg

POLICE LOGISTIC DEP

1 MOUNT PLEASANT RD, BLK 8 OLD POLICE

SINGAPORE 298333

64784840

ATTN: Motor Claim Department

WS Ref: TP/SPF/AMK

Claim Type: Accident Date: TP Veh Reg No:

TEL:

Third Party

15/02/2019 TP1094B

FAX: 64784848

Not Nothorke USing 89001 Rusing After Pains

Chassis No: Engine No:

Reg. Date:

2 day,

Estimate No:

Policy No:

Veh Reg No:

Make/Model:

Date:

JHMFD16309S202192

ES1991215/AMK

DMPCSN3003951900

HONDA CIVIC 1.8L

05 Mar 2019

**SJS3127E** 

R18A14013414

**AUTO** 

08/08/2009

Estimate Repair Cost to Vehicle No :SJS3127E

e	escription	U/Price	Quantity	List P	rice	Amoun
					<u>S\$</u>	<u>s</u>
is	st Price		6	rs		
R	ONT BUMPER	638.00	1 PC		3.00	
R	ONT BUMPER NUMBER PLATE GARNISH	51.40	1 PC	no 5	1.40	_
R	ONT BUMPER CLIP	3.90	5 PC	m 1	9.50	
				703	3.90	
			Less 20%	14	1.78	567.1
pe	ecial Net			_		
R	ONT NUMBER PLATE	35.00	1 PC	By 3:	5.00	
				3:	5.00	35.0
al	bour					
	MOVE & REFIX FRT BUMPER & ATTACHMENTS,GRILLE REALIGN THE SAME	300.00	1 LA	300	00.0	2201
	TTTY & RESPRAY FRT BUMPER,BONNET & ALL AFFECTED REAS	450.00	1 LA	450	0.00	2801
				750	00.0	750.0
				Total		S\$ 1,352.1
			Add G	ST @ 7%		94.6
			Total Amour	t Payable		S\$ 1,446.7

<sup>\*</sup> SURVEY VEHICLE AT ANG MO KIO WORKSHOP

For Cheng Hoe Motor Pte Ltd

DORLYN LI

## AUTHORISED SIGNATURE

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:



# 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
---------------------------------------------	-----------------------

AUTOMOTIVE ENGINEERING & MGT DIVISION Ref: CS/SPF19003493/Kqd3e2

ACCIDENT CLAIM SECTION (SPORE POLICE

FORCE)1 MOUNT PLEASANT ROAD BLK 8 OLD

Date: 12-03-2019

		NGAPORE 298333	23.07	11   1   1   1   1   1   1   1   1   1
TT	N : FRANKIE THA	Υ	Code: SPF	
. "		Policy Particula	rs :- THIRD PARTY CLA	AIM .
	Insured Veh.	TP 1094B	Veh. Inspected	SJS 3127E
	Policy No.		Coverage (\$)	0.00
	Claim No.	AEMD/105/009/2019/005	Excess (\$)	0.00
	Assign From	FRANKIE THAY	Assign Date	25/02/2019
2.		Vehicle Pa	rticulars & Condition	
	Make & Model	HONDA CIVIC (A)	c.c	1799
	Engine No.	HIDDEN	Year of Reg.	2009
	Chassis No.	JHMFD16309S202192	Colour	METALLIC PEARL WHITE
	Odometer	148722	Steering	IN ORDER
	Brakes	IN ORDER	Modification	SPORTS RIM
	General	GOOD		
3.		Cond	ditions of Tyres	
		Size	Make	Balance
	R/H Front Tyre	225/40Z R18	MICHELIN	6 mm
	L/H Front Tyre	225/40Z R18	MICHELIN	6 mm
	R/H Rear Tyre	225/40Z R18	MICHELIN	6 mm
	L/H Rear Tyre	225/40Z R18	MICHELIN	6 mm
١.		Descri	ption of Damages	
	THE VEHICLE SU	STAINED DAMAGES AT THE	FRONT PORTION.	
	DAMAGES SEE D	ETAILS.		
5.	2727	Gene	eral Information	
	Accident Date	15/02/2019	Inspection Date	05/03/2019
	Survey held at	CHENG HOE MOTOR SERV	ICE	
		10 ANG MO KIO IND PARK 2 #01-04 ANG MO KIO AUTOP		17
ā.			Remarks	1月10日 10日 10日 10日 10日 10日 10日 10日 10日 10日
	A)THE INSPECTION B)IN ACCORDANG	ON WAS CONDUCTED ON A"\ CE TO YOUR INSTRUCTIONS	NITHOUT PREJUDICE" BA , WE HAVE NOT AUTHORI	SIS. ISED REPAIRS.
b.		Estima	te Days of Repair	
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	2 Working Da	iys



# 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 1

# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJS 3127E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	CRACKED	638.00	638.00
1	FRONT BUMPER NUMBER PLATE GARNISH	DENTED	51.40	51.40
5	FRONT BUMPER CLIP @\$3.90	NECESSARY	19.50	19.50
	LESS 20% DISCOUNT		-141.78	-141.78
			567.12	567.12
	SPECIAL NETT ITEMS			
1	FRONT NUMBER PLATE (SN)	BENT	35.00	35.00
			35.00	35.00
	LABOUR			
	REMOVE & REFIX FRT BUMPER & ATTACHMENTS, GRILLE & REALIGN THE SAME.		300.00	220.00
	PUTTY & RESPRAY FRT BUMPER, BONNET & ALL AFFECTED AREAS.		450.00	280.00
			750.00	500.00
	GRAND TOTAL		1,352.12	1,102.12

RECOMMENDED COST OF LUMP SUM REPAIRS	900.00
(TO ITS PRE-ACCIDENT CONDITION)	

Report Ref No. CS/SPF19003493/Kqd3e2

NOTES : THE ESTIMATED UPPER RANGE OF REPAIR COST FOR THE DAMAGED VEHICLE IS IN THE REGION OF \$1,000-\$2,000

KONG SENG CHEONG

**Licensed Appraiser** 

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

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