INS. CASE OWNER: Jns | CC 4 ASM /AXA1900 35847 [illegible] W | LKK: IDAC:

ASSIGNMENT

Surveyor: Tanfitch | DOI: 26/8/19 | Date / Time: 26/8/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No.: XD 6761T		Claim No.:	Samo [illegible] 100841
Name of Insured:		Policy No.:	
Insured Tel No.:	HP:	Make / Model:	
Excess Sec II :S$	D.O.A: 23/8/19	Place of Accident:	
Is driver the owner? (YES / NO)	Nature of Accident:		

If NO, Driver Name / Age:
Driver Tel No.: (V/L: YES / NO)

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO
Insured Liability: % Final ? Yes / No

GZ 72850 → →

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

Date/ Time

[illegible] - X XD6761T - X

* SmartClaim - VIRTUAL

- OINR

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	
After call ltr to OI:	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup):		
After call ltr to OI:		
Authorisation To Act:	✓	
Release Voucher:	✓	
Final Repair Bill:	✓	
Car Rental Invoice:		
Towing Invoice:		
LTA / GIA:	✓	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD:	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: S$ (days) Reduction: % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 3/7/19 Confirm with: Yandy Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.: 20	If NO or B 28, Ass. Lia:
Repair Cost:	S$ 4280.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 640.00 (S 80 x 8 days)	COPY RIGHT 5/7/19
Loss of Income (LOI):	S$ (S x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search:	S$ 2.00	
Medical:	S$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format:
Legal Cost:	S$	3) Survey fee:
Total:	S$ 4922.00 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 4922.00	Name 1: ASM Automotive Services Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3:

Taufikh | REF: ASM

CoE 2021 July

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

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: 915K

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 8 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GZ 7285D Yr Regn: 2006 Aug

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

Make: Mitsubishi FB70 cc 2835

Colour: Green A/C: Insured / Std / Nl / NA

Sp.Reading: 396443 T/Radio: Insured / Std / Nl / NA

Eng/No:

C/No: FB70ABA00437.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185 R14

R: 155 R13

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

Front			Rear		
R/Bal.	6	mm	R/Bal.	6/6	mm
L/Bal.	6	mm	L/Bal.	6/6	mm
D.O.A.			D.O.I.	26/2/19	

Survey held at: ASM Auto

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

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

Rebate: $10,812. 13 Viewer sector 1

Date / Time | Action / Instruction

Inform July Until Approv

2/7/19 confirm US $4000.00 with 8 working days.

(Red - $ 8339.01 68%)

Date/Time File Pass to:

[ ] : Preli. Report

[ ] : Final Report

Date/Time File Return to:

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

Add Fee: [ ] Site Insp. : $

[ ] Interview : $

[ ] : $

[ ] Weekend : $

Report Format :

Lump Sum / LB ...

MSI19025209-01 / STA INSPECTION PTE LTD - Boon Lay
ENTRY DATE & TIME: 23/02/2019 11:29
SUBMITTED BY: Woodford Richard Vincent

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	23/02/2019 11:29
Date Of Accident	22/02/2019 16:00
Exact Location Of Accident	TUAS SOUTH AVE - 3
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GZ7285D
Insured/Policyholder	
Name Of Registered Owner	TOLL LOGISTICS (ASIA) LIMITED
Co Reg No	NA 199408934C
Email Address	JINGYOU.LAI@TOLLGROUP.COM
Mobile Phone No	(LOCAL) +65-82921214
Alternative Phone No	OFFICE-97739930
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LORRY
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-18092303MFCV/2
Cover Note Number	
Driver	
Name of Driver	GURJANT SINGH
Passport No/FIN	G5278051P
Date Of Birth	16/10/1986
Occupation	OUTDOOR
Date Of Driving Pass	07/05/2015
Driving Experience	3 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82921214
Fax Number	
Contact Number	OFFICE-82921214
EMail Address	NOEMAIL

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 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.
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.

TOLL LOGISTICS (ASIA) LIMITED TC-L6M02

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.:
23/2/2019

SINGAPORE POLICE FORCE

POLICE REPORT (NP299) CONTINUATION OF REPORT Report No: J/20190222/2120

cargo area to be buckled up and the tailboard locks to be damaged. I suffered mild strain on my neck and shoulder. The truck driver was not injured. I did not seek medical treatment. This is the first time such incident had happened.

Initially, we had wanted to settle the matter privately. However, the boss of the other driver was aggressive when my head of department contacted them regarding the private settlement. Thus, I am lodging this report as a record purpose to bring to my insurance company.

Signature Of Officer Recording The Report: J / Staff Sgt NORIMAWATI BINTI ABDULLAH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/02/2019 19:34
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Insp TAN YU TING Contact No.: 67910000	Classification Of Case:

Authentication Stamp

SN 127

Signature :

Singapore Police Force

ASM Automotive Services Pte Ltd

No 13, Pioneer Sector 1, Singapore 628424
Main Line: 6265 0980 Fax: 6265 6068
Email: enquiry@asmauto.com.sg
Co / GST Reg No: 201203813C

FROM	: Jaclyn Lai	**DATE**	: 25.02.2019
TEL. NO.	: 6265-0980 / 9236-8218		
EMAIL	: jaclynlai@asmauto.com.sg	**VEHICLE NO.**	: GZ7285D
		MODEL NO.	: MITSUBISHI FB70ABOSRDEB
TO	: AXA Insurance Singapore Pte Ltd	**CHASSIS NO.**	: FB70ABA00457
ATTN	: Motor Claim Department	**ENGINE NO.**	: 4M40HB9015
TEL. NO.	: 1800-8804-741	**LTA REG DATE**	: 17-Aug-06
EMAIL	: motor.survey@axa.com.sg		
		CLAIM TYPE	: TP Claim - XD 6261 T
CC	: Toll Logistic (Asia) Limited	**D.O.A**	: 22.02.2019
		CLAIM REF NO.	: asm/AC19013/AS

Quotation for Accident Repair

S/N	SPARE PARTS (SPECIAL NETT)	QUANTITY	UNIT PRICE	AMOUNT
1	Rear Deck assy – dismantle photo	1	$ 7,326.31	$ 7,326.31
2	Rear Crossmember – dismantle photo	1	$ 893.27	$ 893.27
3	Front air duct Snonkel	1	$ 540.24	$ 540.24
4	Air intake Box	1	$ 346.52	$ 346.52
5	Connecter	1	$ 67.99	$ 67.99
6	Water spare tank	1	$ 177.68	$ 177.68
		SUB-TOTAL :		$ 9,352.01
		less 25%		$ 2,338.00
		Bal		$ 7,014.01
	Nett item			
1	rear number plate	1	$ 25.00	$ 25.00
2	Spark arrester	1	$ 250.00	$ 250.00
		Total Nett		$ 275.00
		Total Parts		$ 7,289.01

LABOUR CHARGES

1	To remove and replace rear deck assy , replace air duct , box and connector. Panel beat front rear end panel , door pillar and relalignment etc.	$ 1,750.00
2	To remove rear deck , perform hot work to kncok and straighten chassis . Realignment etc.	$ 2,500.00
3	Spray painting	$ 800.00
	TOTAL LABOUR :	$ 5,050.00
	GRAND TOTAL :	**$ 12,339.01**

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:

LKK AUTO CONSULTANTS PTE LTD (TP) Menu

Service Request Details

Claim
S9M01F4M

Reference
None

Loss Date
February 22, 2019

Report Date
Feb 26, 2019 8:54:48 AM

Request Date
February 26, 2019

Due Date
March 5, 2019

Vendor Name
LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss
Third Party Vehicle Damage

Services
Pending verification - Direct Settlement

Actions

Next Step
Agree to perform service

Decline Work | Accept Work

Vehicle Information

Incident Vehicle Registration #
GZ7285D

Make
TPVD MITSUBISHI

Model
LORRY

LKK AUTO CONSULTANTS PTE LTD (TP) Menu

24 SIN MING LANE, , 573970

Primary Contact/Insured

ORIENT NATURAL RESOURCES PTE LTD
24 SIN MING LANE, #02-94 MIDVIEW CITY, 573970, Singapore
63380083
ASPETRA.MOTOR@GMAIL.COM

Claim Handler

TAN Jas
6568804844
jas.tan@axa.com.sg

Additional Instructions

-ASM -VIRTUAL ACC -NR-we will send the letter -Please do not finalise repair with workshop.

Messages Invoices History Documents Assessment Metrics Notes

New Message

Nivitha (LKK Auto)

From: Shu Pei (LKKAuto) <shupei@lkkauto.com>
Sent: Tuesday, 26 February 2019 11:58 AM
To: assignments
Cc: Admin A
Subject: FW: Third Party Claim: GZ7285D and XD6261T (your reference); DOA: 22.02.2019
Attachments: GZ7285D - SAS (190222).PDF; Gz7285D - Q.pdf

****SMARTCLAIM NEW CASE***

SPOKEN WITH YANDY -VEH IN***KINDLY ARRANGE TODAY. ****VIRTUAL ACC****

12.05pm @ 28/2/19
vehicle in
Yandy
Tan Jiah

Additional Instructions -Please do not finalise repair with workshop.

TQ

Best Regards,

Shu Pei| Admin

LKK Auto Consultants Pte Ltd

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

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

From: ASM Yandy <yandy@asmauto.com.sg>
Sent: Monday, 25 February 2019 4:23 PM
To: SG AXA Insurance SM AXA SGP - Motor Survey <motor.survey@axa.com.sg>
Cc: ASM Jaclyn <jaclynlai@asmauto.com.sg>; Alex <alex@asmauto.com.sg>
Subject: Third Party Claim: GZ7285D and XD6261T (your reference); DOA: 22.02.2019

Dear Sir / Madam,

Our client, the owner of GZ 7285 D wish to file claim for the damages sustained from the above-stated accident, against your insured, XD 6261 T.

We hereby append a copy of our estimate and SAS for your kind perusal.

Kindly advise on liability and arrange for survey. Thank you.

*Our office & workshop is now at **No. 13 Pioneer Sector 1, Singapore 628424**.*
***All contact numbers and fax number are remain unchanged.*

Best Regards,

Yandy Ang

Motor Claims and Safety Officer
ASM Automotive Services Pte Ltd
No. 13 Pioneer Sector 1, Singapore 628424
Tel: 6265 0026 | Fax: 6265 6068
Web: www.asmauto.com.sg

ASM Automotive Services Pte Ltd

No 13, Pioneer Sector 1, Singapore 628424
Main Line: 6265 0980 Fax: 6265 6068
Email: enquiry@asmauto.com.sg
Co. / GST Reg. No.: 201203813C

3rd Jun 2019

Our Ref : asm/AC19013/AS
Your Ref : XD 6261 T

AXA Insurance Singapore Pte Ltd
8 Shenton Way,
#24-01 AXA Tower
Singapore 068811

Dear Motor Claims Department,

Subject: Accident Involving GZ7285D and XD6261T on 22.02.2019

We are instructed by our client to file claims for the damages sustained, against you/your insured in connection with the above-mentioned accident. The said accident took place at Tuas South Avenue 3 on 22.02.2019, involving our client's vehicle GZ7285D and your insured under vehicle registration XD6261T.

We were given notice that the accident was caused by your insured's negligent driving and/or poor management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client was put to loss and expense, details of which are as follows:

1.	Repair Cost	S$	4,280.00	(Include GST)
2.	Loss Of Use	S$	1,440.00	(S$180 x 8 Days)
3.	Search Fee	S$	2.00	
	Total	**S$**	**5,722.00**	

We hereby append the following relevant documents for your perusal:

1. SAS Report of GZ 7285 D
2. Letter of Authority & Indemnity
3. Repair Bill (Ref.: 19050295)
4. Search Bill

Kindly let us hear from you 14 days from the date hereof.

Please feel free to contact us should you require further information. We look forward to your fast settlement. Thank you.

Best Regards,

Yandy Ang
Motor Claims and Safety Officer
Tel : 6265 0026
Fax : 6265 6068
Email : yandy@asmauto.com.sg

CC: Alex Sim
CC: Toll Logistics (Asia) Limited

LETTER OF AUTHORITY & INDEMNITY

To: ASM AUTOMOTIVE SERVICES PTE LTD
NO 13, PIONEER SECTOR 1
SINGAPORE 628424

ACCIDENT INVOLVING GZ7285D AND XD6261T AT TUAS SOUTH AVENUE 3 ON 22.02.2019.

1. I/We, the owner of vehicle no. GZ 7285 D hereby instruct and authorise you to commence repairs to the said vehicle.

2. You are further authorised to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.

3. You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms, as you deem fit.

4. In the event that I/we am/are required to attend at my/our solicitors' office or to attend Court in connection with my/our claim, I/we shall render full co-operation.

5. I/we understand that if my vehicle was driven by my/our authorised driver/employee at the time of accident, it is important that I/we procure his/her attendance at the solicitors' office or in Court whenever so required.

6. I/We shall keep you informed of any correspondence and/or summons that I may receive due to this action before agreeing to pay or receive any monies due to this claim.

7. I/We agree that the settlement payment is to be paid to ASM Automotive Services Pte Ltd and shall be full satisfaction liquidation and discharge of all claims.

Dated this 25 day of February 2019

Signature : _____

Name : Dickson Tan

Designation : HOD Port Logistics

Address : 60 Pioneer Road
Singapore 628509.

(Company stamp, if applicable)

TOLL LOGISTICS (ASIA) LIMITED TC-L6M01

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	XD 6261T (Insd veh)	Model: MITSUBISHI FE70.
	GZ 7285D (TP veh)	
Date of Accident/ Time:	22/02/2019	

Repair Estimate	:$	13,202.74	
Final Repair Cost	:$	4,280.00	
Loss of Use	:$	640.00	08 days at $ 80.00 per day
Rental (if any)	:$		days at $ per day
LTA / GIA Search Fee	:$		
Others:	:$	2.00	
	:$		
Final Settlement Sum	:$	4,922.00	

Payee Name : ASM AUTOMOTIVE SERVICES PTE LTD

Is Third Party Workshop GIA Registered? [X] YES [ ] NO (Kindly indicate below)

A) For **Non GIA Registered Workshop:** Agreed Liability _____(%)

B) For **GIA Registered Workshop:** BOLA Applicable: Yes/ ~~No~~ BOLA Scenario No: 23

BOLA Liability: 100 (%) Assessed Liability (*):_____(%)

** Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.*

Remarks:

NOTE:

1. **PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.**
2. **THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.**
3. **AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.**

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are ***not received within 7 days*** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

Automotive Services Pte Ltd Co. Reg. No. 201203813C

Signature of workshop representative / **Workshop stamp (if applicable)**
Name of Representative: Jaclyn Lai
Date: 5/7/19

Signature of Witness / **Workshop stamp (if applicable)**
Name of Witness: Yandy Ang
Date: 2/7/2019

LKK MTH

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date:

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M)
8 Shenton Way #24-01 AXA Tower Singapore 068811
AXA Customer Centre #01-21/22
Telephone: +65 6880 4888 – axa.com.sg

ASM Automotive Services Pte Ltd

No 13, Pioneer Sector 1, Singapore 628424
Main Line: 6265 0980 Fax: 6265 6068
Email: enquiry@asmauto.com.sg
Co. / GST Reg. No.: 201203813C

Tax Invoice

AXA Insurance Singapore Pte Ltd
8 Shenton Way,
#24-01 AXA Tower
Singapore 068811
Tel: 1800-880-4741 (3)
Attn: Motor Claims Dept

No. : 19050295
Date : 31-05-2019
Ref. : 23687-GZ7285D-190226
Staff : Yandy
Terms : 30 Days
Job : 23687-GZ7285D-190226

GZ7285D - MIT FB70

SNo	Description	Quantity	Unit Price	Amount
	Veh. Owner Name : Toll Logistics (Asia) Limited Make & Model : MITSUBISHI FB70ABOSRDEB Chassis No. : FB70ABA00457 Engine No. : 4M40HB9015 LTA Reg. Date :17 Aug 2006 Date Of Accident : 22 Feb 2019 Claim Type : Third Party Claim Our Ref : asm/AC19013/AS Your Ref : XD6261 T			
1	Being Lump-Sum Charges for Accident Repair & To Replace All Necessary Items.	1	4,000.00	4,000.00

Sum of Singapore Dollars Four Thousand Two Hundred Eighty Only		Amt S$	4,000.00
		7% GST	280.00
		Total S$	4,280.00

Terms & Conditions:
1. Any discrepancy in amount must be notified in writing within 14 days upon receiving of the invoice or will not be entertained.
2. All cheques should be crossed and made payable to ASM AUTOMOTIVE SERVICES PTE LTD, please write the invoice no. on the reverse of your cheque.

Authorised Signature

GENERAL INSURANCE ASSOCIATION
RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-029409
Date of Request: 25/02/2019

Your Ref No: Online Purchase

ASM Automotive Services Pte Ltd
No.13 Pioneer Sector 1
Singapore 628424

Dear Sir/Madam,

Enquiry Date 25/02/2019
Enquiry By Sim Choon Thai, Alex
TP Vehicle No. XD6261T
Accident Date 22/02/2019

DESCRIPTION	AMOUNT (S$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:
Date:
[X] GIRO [ ] Cash [ ] Cheque

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

AXA INSURANCE PTE LTD

Ref : CC4/ASM19003584/T1wb3q2

8 SHENTON WAY #24-01
AXA TOWERSINGAPORE 068811

Date : 10-07-2019

ATTN:JAS

Code : ASM

1. Policy Particulars :- THIRD PARTY CLAIM

	Insured Veh.	XD 6261T	**Veh. Inspected**	GZ 7285D
	Policy No.		**Coverage ($)**	0.00
	Claim No.	S9M01F4M	**Excess ($)**	0.00
	Assign From		**Assign Date**	26/02/2019

2. Vehicle Particulars & Condition

	Make & Model	MITSUBISHI FB70	**c.c**	2835
	Engine No.	HIDDEN	**Year of Reg.**	2006
	Chassis No.	FB70ABA00457	**Colour**	GREEN
	Odometer	396443	**Steering**	IN ORDER
	Brakes	IN ORDER	**Modification**	NIL
	General	GOOD		

3. Conditions of Tyres

		Size	**Make**	**Balance**
	R/H Front Tyre	185 R14	YOKOHAMA	6 mm
	L/H Front Tyre	185 R14	YOKOHAMA	6 mm
	R/H Rear Tyre	155 R13 (D)	YOKOHAMA	6/6 mm
	L/H Rear Tyre	155 R13 (D)	YOKOHAMA	6/6 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION.

DAMAGES SEE DETAILS.

5. General Information

	Accident Date	22/02/2019	**Inspection Date**	26/02/2019
	Survey held at	ASM AUTOMOTIVE SERVICES PTE LTD 2 KWONG MIN ROAD SINGAPORE 628705		

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: **8 Working Days**

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. GZ 7285D

Qty	Description of Parts	Condition	Estimate By Workshop ($))	Our Adjusted ($)
	REPLACEMENT OF PARTS			
1	REAR DECK ASSY (CONSISTENT)	BENT	7,326.31	4,500.00
1	REAR CROSSMEMBER (CONSISTENT)	TO REPAIR SEE LABOUR	893.27	-
1	FRONT AIR DUCT SNONKEL (CONSISTENT)	DEFORMED	540.24	540.24
1	AIR INTAKE BOX (CONSISTENT)	NOT NECESSARY	346.52	-
1	CONNECTER (CONSISTENT)	NOT NECESSARY	67.99	-
1	WATER SPARE TANK (CONSISTENT)	NOT NECESSARY	177.68	-
	LESS 25% DISCOUNT		-2,338.00	-1,260.06
			7,014.01	3,780.18
	SPECIAL NETT ITEMS			
1	REAR NUMBER PLATE (SN) (CONSISTENT)	BENT	25.00	25.00
1	SPARK ARRESTER (SN) (CONSISTENT)	NOT NECESSARY	250.00	-
			275.00	25.00
	LABOUR			
	TO REMOVE AND REPLACE REAR DECK ASSY ,REPLACE AIR DUCT ,BOX AND CONNECTOR .PANEL BEAT FRONT REAR END PANEL,DOOR PILLAR AND RELALIGNMENT ETC.INCLUSIVE OF THE REPAIR OF REAR CROSSMEMBER .		1,750.00	1,400.00
	TO REMOVE REAR DECK ,PERFORM HOT WORK TO KNOCK AND STRAIGHTEN CHASSIS .REALIGNMENT ETC.	NOT NECESSARY	2,500.00	-
	SPRAY PAINTING.		800.00	600.00
			5,050.00	2,000.00
	GRAND TOTAL		**12,339.01**	**5,805.18**

	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			**4,000.00**

Report Ref No. CC4/ASM19003584/T1wb3q2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

SERVICE REQUESTS | MESSAGES | CLAIMS

Service Request Details

Claim	S9M01F4M
Reference	CC4/ASM19003584/T1wb3q2
Loss Date	22 February 2019
Report Date	26 Feb 2019 8:54:48 AM
Request Date	18 April 2019
Due Date	
Vendor Name	LKK AUTO CONSULTANTS PTE LTD (TP)
Type of Loss	Third Party Vehicle Damage
Services	Pending verification - Direct Settlement

Actions

Next Step: Wait for: Approve invoice

Add Invoice

Vehicle Information

Incident Vehicle Registration #	GZ7285D
Make	TPVD MITSUBISHI
Model	LORRY

Service Address

24 SIN MING LANE, , , 573970

Primary Contact/Insured

ORIENT NATURAL RESOURCES PTE LTD
24 SIN MING LANE, #02-94 MIDVIEW CITY, 573970, Singapore
63380083
ASPETRA.MOTOR@GMAIL.COM

Claim Handler

TAN Jas
6568804844
jas.tan@axa.com.sg

Additional Instructions: -ASM -VIRTUAL ACC -NR-we will send the letter -Please do not finalise repair with workshop.

Messages | Invoices | History | Documents | Assessment | Metrics | Notes

Document Type | Document SubType

+ Upload Document

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
LKKInvoice1 (4).pdf	Invoice	Surveyor/ Assessor expense	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
LKKInspection.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
LKKAdjustment1a.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
GIA SEARCH.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
PAYMENT BREAKDOWN_EXPRESS SETTLEMENT FORM.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
AUTHORISATION TO ACT FORM.pdf	Forms / Claim Documents	POA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
WORKSHOP INVOICE.pdf	Invoice	Repairer	LKK AUTO CONSULTANTS PTE LTD (TP)	11 July 2019
LKK Resurvey Photo.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
LKK Resurvey Photo 1.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
Immediate Advice with Mandate.pdf	Forms / Claim Documents	Assessment	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
LKK Survey Photo.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
LTA PARF COE Rebate Details.pdf	Reports & Statement	Market Value Report	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
TP ESTIMATE - MARKED.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	3 May 2019
TP ASM-EMAIL FROM WORKSHOP FOR TP REG.msg	Letters and Correspondence	Others	NIKAM Santosh Pandurang	26 February 2019