

INS. CASE OWNER

Stacy

CC 4/15/19 5988, R 6630

LKK

IDA

Surveyor

REASON

DOI

ASSIGNMENT

05/04/19

Date / Time

4/4/19

Registered in Meriten

Pre-assign / CCU / FTE



Insured Vehicle No.

SHC 521P

Name of Insured

TERRY - MRS COVILLES M

Insured Tel No.

HP

Excess Sec II :SS

D.O.A

2/4/19

Is driver the owner?

( YES / NO )

Nature of Accident :

If NO, Driver Name / Age

Mrs YUE SEH

Driver Tel No. :

(V/L: YES / NO )

Claim No.

9902301 / 108752

Policy No.

VPR / 11680620

Make / Model :

MINI

Place of Accident :

2 TRV1 QUELLE

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

Insured Liability : % Final ? Yes / No

SHD 2/37D



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Print into



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date / Time

4/10/19 - x

SHC 521P - x

STAGE

DATE / PIC

Non-Reporting to (1st)

Non-Reporting to (2nd)

Non-Reporting to (Final)

Notification to (if non-pickup)

Call CR

After call to OI

10/08/19 - vic

Documentation Check List: Handler Typist

Notification to (if non-pickup)

After call to OI

Authorization 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

DO FORM

Confirm by:

Email ☐ Call ☐

PRELIMINARY ADVICE

Date/Time

12/08/19

Sent By

vic

FINALIZATION

Date/Time

Confirm with

Repair Cost

US

1100.00

( 2 days ) Reduction:

to 0

FINAL SETTLEMENT

Date/Time

04/09/19

Confirm with

AUDR

Email

Call

Final Liability

%

100

( Agree / Assessed ) BOI A S/N No. :

14

Repair Cost (w/995)

SS

1,174.00

Loss of Rental (LOR)

SS

266.70

( 3 days ) X @ 88.90

Loss of Use (LOU)

SS

15

( 5 days )

Loss of Income (LOI)

SS

15

( 5 days )

LOR only ☐ LOU only ☐

LOR + LOU ☐

LOR + LO ☐

[Tick only one]

GIA/LTA Search

SS

15

Medical

SS

15

Measurement

SS

15

(e.g. Tow / Independent )

Legal Cost

SS

15

Total

SS

1,443.70

Global Sum SS:

FINAL PAYMENT

Date/Time

Confirm with

Email

Call

Payee 1

SS

1,443.70

Name 1

PRIME AUTO CLAIMS SERVICE PTE LTD

Payee 2 (Strike if N.A.)

SS

15

Name 2

Payee 3 (Strike if N.A.)

SS

15

Name 3

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

SHD 2737D

at Workshop m/s

PRIME AUTO

of

G, Boro PL

Insured:

ASAM (AAA)

Policy No

Claims No.

Sum Insured:

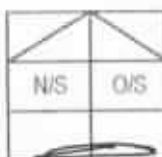
Excess:

(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 Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

2

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHD 2737D

Yr Regn:

2013 / Jun

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

Truck / Trailer or

Make:

TOYOTA PRIUS HYBRID 1.8L C.C. 1757

Colour:

Brown

A/C: Insured / Std / NI / NA

Sp. Reading:

578022

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

2VW 301563161

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

R:

185/65R15

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

TOYO / YOKO or

WESTLAK

Front

Rear

R/Bal:

5

mm

R/Bal:

5

mm

L/Bal:

5

mm

L/Bal:

5

mm

D.O.A:

02/04/19

D.O.A:

08/04/19

Survey held at

PRIME 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.

Date / Time

Action / Instruction

L/S \$1,100.00  
CASH: \$766.00 (70%)

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

5 - RS, 52

Photos:

Others:

TOTAL

Report Format :

Lump Sum / L.B.I: (\$)

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Weekend (\$)





# Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M  
6 Benoi Place Singapore 629927  
Tel: 6861 0908 Fax: 6515 2948

Date: 04.04.2019

AXA Insurance Singapore Pte Ltd  
8 Shenton Way #27-01/02  
AXA Tower  
Singapore 068811

Attn: Motor Claims Dept

## RE: ESTIMATE COST OF REPAIR TO VEHICLE SHD2737D PRIUS HYBRID 1.8L A (2012)

### To Supply

1 )	1pc	Rear bumper <i>DE</i>	\$	1,218.00
2 )	1set	Rear bumper clips <i>nae</i>	\$	30.00
Sub total parts			\$	1,248.00
Less: 25% discount			\$	(312.00)
			\$	936.00

### To supply S.Nett Parts

1 )	1set	Reverse sensor <i>?</i>	\$ <i>200</i>	<del>250.00</del>
Sub total S.Nett parts			\$	250.00

### L/charge

1 )	To remove & replace reverse sensor. Check wiring.	\$	<i>250</i>	<del>50.00</del>
2 )	To knock / repair rear end panel. Remove rear bumper. Replace the above parts. Align & adjust rear bumper.	\$	<del>300</del>	<del>300.00</del>
3 )	To putty, respray painting rear bumper & rear end panel. To polish.	\$	<i>200</i>	<del>300.00</del>
Sub total L/charges			\$	650.00
Estimated Grand Total			\$	1,836.00

Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Acknowledged by Receiver: \_\_\_\_\_  
 To be subject to final approval from Insurance Company.  
 • Only a member of staff (must be authorised staff)  
 • All repairs must be carried out in accordance with the relevant manufacturer's instructions.  
 • Third party claims are subject to the relevant insurer's policy.  
 • Parts must be subject to the relevant insurer's approval.  
 • To ensure damaged parts are replaced with the same quality.  
 • To ensure the vehicle is returned to its original condition.  
 The Receiver of the Estimate:  
 LGP Auto Claims Dept, Singapore

*Resau*  
*Hp 90010068*  
*2 days*  
*43*  
*05/04/19 @ 1730*  
*Resay after repair*



## Re:<MANDATE IA> S9M01J01

Type

🔗 Question

Message

please proceed

Reply



## Prime Auto Claims Service Pte Ltd

GST Reg. No : 201606560M

6 Benoi Place Singapore 629927

Tel: 6861 0908 Fax: 6515 2948

Date: 12.04.2019

Our Ref: SHD2737D

AXA Insurance (S) Pte Ltd  
No. 8 Shenton Way #27-01  
AXA Tower  
Singapore 068819

Without prejudice

Attn: Ms. Motor Claims Dept

Dear Sir / Madam,

### **ACCIDENT ON 02.04.2019 INVOLVING VEHICLE NO. SHD2737D & SHC5211P**

We are on behalf of M/S Prime Car Rental & Taxi Services Pte Ltd owner of SHD2737D in their third party claim against your insured / driver of vehicle SHC5211P

Appended below our client's claim:-

1. Cost of repair	\$ 1,177.00
2. Loss of rental @\$88.90 x 3 days	\$ 266.70
	<hr/>
Total	\$ 1,443.70

We enclosed herewith our Invoice 3445, GIA search receipt, Authorization to Act & Letter of Certification for your retention.

For an amicable direct settlement, please let us have your reply the soonest.

Regards

Yours faithfully,

Ms. Alice Leong

E-mail: [aliceleong@primeautoclaims.com](mailto:aliceleong@primeautoclaims.com)

Encl.

## Vic (LKKAUTO)

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**From:** Vic (LKKAUTO)  
**Sent:** Wednesday, 10 April, 2019 7:35 PM  
**To:** claims@transcab.com.sg  
**Cc:** Admin A; Vic (LKKAUTO); diskayao@ava-ins.com; alicelim@ava-ins.com; IreneNg@ava-ins.com  
**Subject:** YOUR REF : P1680520 (SHC 5211P)\_ACCIDENT INVOLVING SHC 5211P AND SHD 2737D AT/ALONG T2 TAXI QUEUE ON 02/04/2019

10 APRIL 2019

TRANS-CAB SERVICES PTE LTD  
SINGAPORE

Dear Sir/Madam,

**OUR REF : CC4/ASM19005988/R1hb3**

**YOUR REF : P1680520 (SHC 5211P)**

**ACCIDENT INVOLVING SHC 5211P AND SHD 2737D AT/ALONG T2 TAXI QUEUE ON 02/04/2019**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from M/s PRIME AUTO CLAIMS SERVICE PTE LTD acting on behalf of the owner of SHD 2737D 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. Unless proven otherwise.

Please be informed that your No-Claim Discount (NCD – if applicable) will be withheld for the time being. Pending for final allocation of liability in settlement by our principal.

We also wish to advise that there is an excess of S\$5,000/- is attached with Third Party Claims. Please be informed that you shall be liable for the excess following any settlement of the third party claim. The applicability of the excess is as follows:

- 1) Any settlement equal to or above the excess, you shall be liable to make the payment of \$5000/-; or
- 2) Any settlement below the excess, you shall be liable for the amount settled.

We shall keep you informed of the third party claim settlement and thereafter kindly let us have the excess payment in your cheque payable to "AXA Insurance Pte Ltd". Please indicate your vehicle registration number and the date of accident on the back of the cheque.

Notwithstanding the excess being applied and/or received by us for the above subject matter, we expressly reserve all our rights under the policy to refund the excess payment in the event that there arises any known policy breach and or exclusion material to coverage.

As Insurers, we shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to AXA immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) / [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com) or deliver it by hand to our Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com).

Please quote the claim reference when you contact us that we can assist you more effectively.

Best Regards,

**Vic Alpeh** | Case Handler

**LKK Auto Consultants Pte Ltd**

Phone: 6841-2096 | email: [vicalpeh@lkkauto.com](mailto:vicalpeh@lkkauto.com) | fax: 6741-4108

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

**LKK** Auto Consultants Pte Ltd *Save the Earth. Print only when necessary.*

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AUTHORISATION TO ACT

In the matters of an accident involving my/our motor vehicle SHD2737D  
And others SHC5211P  
on 02/04/2019 along Changi Airport Terminal 2 Taxi Queue

I/We Prime Car Rental & Taxi Services Pte. Ltd. D/Birth NA Sex NA of  
5 Bencoi Place Singapore 629926 Tel No: 6898 2000  
Occupation NA ROC NA No 1996062932

hereby authorize and appoint Prime Auto Claims Service Pte. Ltd. to act for me/us for  
the purpose of making a third party claim in respect of the abovementioned matter.

I/We further authorize the workshop to settle my/our above mentioned claim in a manner that they  
deem fit and the workshop is also authorized to receive any payment further to settlement of my  
claim with payment cheque being made in favour of the workshop on my behalf.



I/We also knowledge that any settlement the workshop may reach on my/our behalf is on a "Without  
Prejudice and without admission of liability" basis insofar as the driver/owner/Insurers of the other  
vehicle is concerned.

Date the 04<sup>th</sup> day of April month of 2019.


Interpreted and witnessed by

Name:

Signature or Thumb Print

Name:



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHC5211P	(Insd veh)	Model: Toyota Prius Hybrid
	SHD2737D	(TP veh)	
Date of Accident/ Time:	02/04/2019 @ 2240HRS		

Repair Estimate	\$ 1,764.52	
Final Repair Cost	\$ 1,177.00	
Loss of Use	\$ -	days at \$ per day
Rental (if any)	\$ 266.70	3 days at \$88.90 per day
LTA / GIA Search Fee	\$ -	
Others	\$ -	
Final Settlement Sum	\$ 1,443.70	

Payee Name: PRIME AUTO CLAIMS SERVICE PTE LTD

Is Third Party Workshop GIA Registered? ☒ 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: 27
	BOLA Liability: 100 (%)	Assessed Liability (*) _____ (%)
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply		
Remarks:		

#### NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 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.
- 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.

Signature of workshop representative / Workshop Stamp	Signature of Witness / Workshop stamp (if applicable)
Name of Representative: <i>John Lim</i>	Name of Witness: <i>LIV PEI YEE</i>
Date: <i>4/6/19</i>	Date: <i>04.06.2019</i>
Signature of AXA's surveyor/representative:	
Name of AXA's surveyor / Representative:	
Date:	

"The contents of this document apply to vehicles damages only. All personal injuries and damages arising therefrom are excluded from the ambit and application of this document"

**TAX INVOICE**

NO. : 3445

**Prime Auto Claims Service Pte Ltd**

6 Benoi Place Singapore 629927  
Tel: 6861 0908 Fax: 6515 2948  
GST Reg. No: 201606560M  
Reg No. 201606560M

MESSRS AXA INSURANCE (S) PTE LTD

8 Shenton Way  
#24-02 AXA Tower  
SINGAPORE 068811  
SINGAPORE

DATE : 11/04/2019

WORKS ORDER NO : 3481

VEHICLE NO : SHD2737D

ITEM	DESCRIPTION	UNIT PRICE	AMOUNT
	Make/ Model : TOYOTA PRIUS HYBRID Repair Date : 03/04/2019 Terms of Payment : COD		
	<b><u>THIRD PARTY CLAIMS</u></b>		
1	BEING LUMP SUM REPAIR TO THE ABOVE VEHICLE.	1,100.00 \$	1100.00

Compound interests at the rate of 1% per month  
will be charged on late payment.

SUB TOTAL	\$	1,100.00
GST 7%	\$	77.00
ROUNDING ADJ	\$	0.00
TOTAL	\$	1,177.00

PREPARED BY

PRIME AUTO CLAIMS SERVICE  
Manager



# PRIME CAR RENTAL & TAXI SERVICES PTE LTD

Prime Taxi Office  
5, Benoi Place  
Singapore 629928  
Tel : 6898 2000  
Fax : 6862 2628  
Email : primetaxi@singnet.com.sg  
Website : www.primetaxi.com.sg

Co. Cert. No: 199606293Z

Gst Reg. No: 19-9606293-Z

Your Ref : Please advise

Our Ref: SHD2737D

Date : 09.04.2019

To : Whom It May Concern

From : Prime Car Rental & Taxi Services Pte Ltd

## **RE: LETTER OF CERTIFICATION FOR MR. SEAH TECK HUAT HENRY**

This letter serves to confirm that Mr. Seah Teck Huat Henry, Nric Number S6811453E is a Taxi Master for Prime Car Rental & Taxi Services Pte Ltd hiring the Vehicle Registration Number SHD2737D for Singapore Dollar Eighty Eight and Cents Ninety (\$88.90) Only.

Should clarification require I can be contacted at 94524182.

Thank you with Best Regards

Yours Sincerely

Mr Chan Kong Loong  
Workshop Manager



CHAN KONG LOONG  
S78301061  
WORKSHOP MANAGER  
NO. 5 BENOL PLACE  
SINGAPORE 629928

### THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

Vehicle No:	SHC 5211P (Insd veh)	Model:	TOYOTA PRIUS HYBRID
	SHD 2737D (TP veh)		1.8L A
Date of Accident:	02/04/2019		

Global Sum Settlement	: [ ] Yes	[ X ] No
Repair Estimate	: \$	1,964.52
Final Repair Cost	: \$	1,177.00
Loss of Token Sum	: \$	days at \$0.00 per day
Rental (if any)	: \$	266.70 3 days
LTA / GIA Search Fee	: \$	0.00

Others:	: \$	0.00
---------	------	------

	: \$	
Final Settlement Sum	: \$	1,443.70

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: 27

BOLA Liability: 100 (%) Assessed Liability (\*): \_\_\_\_\_ (%)

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

Remarks

\_\_\_\_\_

\_\_\_\_\_

Payment Instruction: Payee's Breakdown		
1)	PRIME AUTO CLAIMS SERVICE PTE LTD	: \$ 1,443.70

JOANNE LEE KHANG MIN  
LKK Auto Consultants Pte Ltd

14/06/2019  
Date

Please attach all the supporting documents to the form.  
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any))

**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/ASM19005988/R1hb3q2	
8 SHENTON WAY #24-01 AXA TOWERSINGAPORE 068811 ATTN:STACEY NG			Date : 14-06-2019	
			Code : ASM	
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SHC 5211P	Veh. Inspected	SHD 2737D	
Policy No.	VPX/P1680520	Coverage (\$)	0.00	
Claim No.	S9M01J01	Excess (\$)	0.00	
Assign From		Assign Date	04/04/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	TOYOTA PRIUS HYBRID 1.8L A	c.c	1797	
Engine No.	HIDDEN	Year of Reg.	2013	
Chassis No.	ZVW301563161	Colour	BROWN	
Odometer	578022	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	185/65 R15	WEST LAKE	5 mm	
L/H Front Tyre	185/65 R15	WEST LAKE	5 mm	
R/H Rear Tyre	185/65 R15	WEST LAKE	5 mm	
L/H Rear Tyre	185/65 R15	WEST LAKE	5 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	02/04/2019	Inspection Date	05/04/2019	
Survey held at	PRIME AUTO CLAIMS SERVICE PTE LTD 6 BENOI PLACE SINGAPORE 629927			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		2 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 1

**ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 2737D**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b><u>REPLACEMENT OF PARTS</u></b>			
1	REAR BUMPER (CONSISTENT)	DEFORMED	1,218.00	1,218.00
1	SET REAR BUMPER CLIPS (CONSISTENT)	NECESSARY	30.00	30.00
	LESS 25% DISCOUNT		-312.00	-312.00
			936.00	936.00
	<b><u>SPECIAL NETT ITEMS</u></b>			
1	SET REVERSE SENSOR (SN) (CONSISTENT)	SERVICEABLE	250.00	-
			250.00	-
	<b><u>LABOUR</u></b>			
	TO REMOVE & REPLACE REVERSE SENSOR .CHECK WIRING.	NOT NECESSARY	50.00	-
	TO KNOCK /REPAIR REAR END PANEL .REMOVE REAR BUMPER .REPLACE THE ABOVE PARTS .ALIGN & ADJUST REAR BUMPER.		300.00	250.00
	TO PUTTY,RESPRAY PAINTING REAR BUMPER & REAR END PANEL .TO POLISH.		300.00	200.00
			650.00	450.00
<b>GRAND TOTAL</b>			<b>1,836.00</b>	<b>1,386.00</b>
<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)</b>				<b>1,100.00</b>

Report Ref No. CC4/ASM19005988/R1hb3q2

**MOHAMMED RASUL BIN MOHD YUNUS**

Automotive Assessor

**HO LEONG CHUAN**

Automotive Assessor

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.

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Service Request Details

Claim

S9M01J01

Reference

CC4/ASH1900598B/RTH362

Loss Date

2 April 2019

Report Date

3 Apr 2019 10:39:00 AM

Request Date

4 April 2019

Due Date

Vehicle Information

Incident Vehicle Registration #

S4D2737D

Make

TPVD TOYOTA

Model

PRIUS HYBRID 1.8L A

Service Address

...

Primary Contact/Insured

TRANS-CAB SERVICES PTE LTD  
No.2 ANG MO KIO STREET 63, 569111, Singapore

Claim Handler

NG Stacey  
6548804351  
stacey.ng@laxa.com.sg

Actions

Next Step

Wait for Approve Invoice


Send Invoice

Vendor Name LKK AUTO CONSULTANTS PTE LTD (TPP)















Type of Loss Third Party Vehicle Damage


Services Pending verification - Direct Settlement

Additional Instructions

Messages	Invoices	History	Documents	Assessment	Metrics	Notes
<div>Document Type <input type="text" value="Document SubType"/></div> <div><div>Upload Documents</div></div>						
NAME		TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED	
 LKKInvoice1.pdf		Invoice	Surveyor/ Assessor expense	LKK AUTO CONSULTANTS PTE LTD (TPP)	14 June 2019	



NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 RENTAL RECEIPT_0001.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 PAYMENT BREAKDOWN_LKK.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 LKKInspection.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 LKKAdjustment3a.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 PAYMENT BREAKDOWN_EXPRESS SETTLEMENT FORM.pdf	Forms / Claim Documents	Satisfaction / Discharge Voucher	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 AUTHORISATION TO ACT FORM.pdf	Forms / Claim Documents	PCA / Authority Letter	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 WORKSHOP INVOICE.pdf	Invoice	Repairer	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 LETTER TO OI.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	14 June 2019
 MANDATE IA.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	17 May 2019
 TP LOD.pdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	17 May 2019
 Email to OI ad 100419.pdf	Letters and Correspondence	Policy Holders / Insured	LKK AUTO CONSULTANTS PTE LTD (TP)	10 April 2019
 LKK INSPECTION PHOTOS.pdf	Reports & Statement	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	10 April 2019
 TP ESTIMATE- MARKED.pdf	Forms / Claim Documents	Estimate / Quotation	LKK AUTO CONSULTANTS PTE LTD (TP)	10 April 2019
 SHCS21P INSD GIA.PDF	Reports & Statement	GIA Report	BATAN BHOSALE Pragnh	4 April 2019

NAME	TYPE	SUB-TYPE	AUTHOR	DATE UPLOADED
 PRI EMAIL RECEIVED FROM WORKSHOP WITH TP CIA REPORT.rmg	Letters and Correspondence	Workshop	BATAM BHOSALE Pragal	4 April 2019