

Case No. CS/111 1904575 / Gvd3^{ex}
 Assignment (Office)
 Stanley Lui
 III
 Date/Time 16/04/2019
 Insured SHD 7103A
 Tel. 6785 3422 / 9616 6658
 Claim No. MCT 19030067
 Date/Time 11/03/2019
 14/3/19
 Vehicle IN/OUT
 Date/Time 149pm @ 12/3/19
 Person Conducted Ah Kwong

Date/Time	Action/Instruction (X) Estimate
	SGE 4284L-X
	SHD 7103A - NA / MCT 190426
	Call more than 3 times no answer.
	Discontinue 15/3/2019 @ 01:28 PM

9/5/19 Huo Qiang mc, submit report according to Simon Marking
 9/5/19 Submit LS \$3050 (Red 1650, 350), 5 days

RECEIVED 09 MAY 2019

ASSIGNMENT

(-2026)

PRE.

From:

Date

14/3/19

Estimated Cost:

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

To Inspect Vehicle No:

SGE 4284L

at Workshop m/s

Hock soon lee

of

Blk 9004 Tampines St-93 #01-124

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

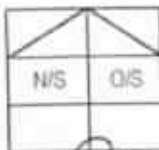
(Client's Record)

Make of Veh:

Ah Kueng @ 96166658

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

\$400k

IDAC Accident Report:

Consistent? Yes or No

GIA / PR Seen:

Consistent? Yes or No

Est. Repairs:

4

days

Res: Yes or No

Lump Sum:

20

%

3 Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SGE 4284L

Yr Regn

16 Mar 2006

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

Truck / Trailer or

Make:

Toyota wish

c.c

1794

Colour:

Silver

A/C:

Insured / Std / NI / NA

Sp. Reading

190087

T/Radio:

Insured / Std / NI / NA

Eng/No:

8NE 100287700

C/No:

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:

195 / 65 R15

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

D.O.I.

14-03-19

Survey held at:

W/S

2:30pm

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

\$3000 - \$4000

Date/Time, File Pass to?

☐ Preli. Report
☐ Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair:

4

Resurvey No. of Trip:

1

Add Fee:

☐ Site Insp (\$)
☐ Interview (\$)
☐ Tech. Invs (\$)
☐ Weekend (\$)

Survey Fee

Transportation

) S + RS. \$

) Photos

) Others

)

TOTAL

120
10
130

Report Format:

PRE.

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

Nivitha (LKK Auto)

From: Stanley Lai <stanley.lai@iii.com.sg>
Sent: Tuesday, 16 April 2019 3:46 PM
To: Admin-D (LKKAuto); 'sur@lkkauto.com'
Cc: Sundari Nagarajan - III; Mekavathanan Sarangapani; Hsiao Tong (chewht@lkkauto.com); Olivia Lau (olivialau@lkkauto.com)
Subject: RE: MCT19030267

Dear Sir/Mdm,

Rights granted in Merimen for the above LOD. Kindly proceed with the paper survey.

TP Veh No. : SGE4284L

Warmest regards,

Stanley Lai

Motor Claims Department

India International Insurance Pte Ltd

64 Cecil Street #04-02 IOB Building

Singapore 049711

Tel: 6347 6100 Ext 206 Fax: 6224 4174

S&P 'A-' rated Company



From: Mekavathanan Sarangapani
Sent: Tuesday, 9 April, 2019 5:38 PM
To: Hsiao Tong (chewht@lkkauto.com) <chewht@lkkauto.com>; Olivia Lau (olivialau@lkkauto.com) <olivialau@lkkauto.com>
Cc: Sundari Nagarajan - III <sundari@iii.com.sg>; Stanley Lai <stanley.lai@iii.com.sg>
Subject: MCT19030267

Paper survey please see damages - 2005 vehicle - Costs of repairs claimed S\$4.7 K ???

Meka

MC7/19030267

	RESERVES			
	TPPD	PRESERVE		
	TPPI	PRESERVE		
	UNINSURED LOSS	PRESERVE		
	SUBRO	PRESERVE	Par Smy	
	LPPN		g/h/c/s	
	INVESTIGATION FEE			
	SURVEY FEES			
	LEGAL FEES			
	OTHERS			
	FRAUD CHECK			
	UPLOAD TO MERIMEN			
	GRANT RIGHTS			

 *** TX REPORT ***

TRANSMISSION OK

TX/RX NO	0507
RECIPIENT ADDRESS	65389850
DESTINATION ID	
ST. TIME	10/04 09:40
TIME USE	00'27
PAGES SENT	2
RESULT	OK



Hock Soon Lee
TOMMY CHOO, MARK GO LLC

Advocates & Solicitors

UEN NO : 201523416E

(a law corporation with limited liability)

151 CHIN SWEE ROAD #14-15/16

MANHATTAN HOUSE

SINGAPORE 169876

TEL : (65) 6532 2455

FAX : (65) 6538 9850 (Services of Court Documents By Fax Not Accepted)

EMAIL: lhling@tcmg.com.sg

Our Ref : LLH/lng/1148/0419/HSLT

Your Ref : SHD 7103 A



9 APR 2019

M/S COMFORT TRANSPORTATION PTE LTD

383 Sin Ming Drive

Gas Building

Singapore 575717

By Certificate of Posting
 (For your attention: without enclosures)

M/S INDIA INTERNATIONAL INSURANCE PTE LTD

64 Cecil Street #04-00

IOB Building

Singapore 049711

BY PDX NO. 8181

PDX Intercompany Exchange Pte Ltd

Attn: Motor Claims Department

FROM TOMMY CHOO, MARK GO LLC
 PDX Box No. 8141

Dear Sirs,

**ACCIDENT INVOLVING SGE 4284 L AND SHD 7103 A ON 11 MARCH 2019 ALONG
 PIE TOWARDS TUAS AFTER BEDOK AVENUE 3**

We are instructed by **Sim Yeow Chuan David**, to claim damages against you or your insured, the driver of motor vehicle no. **SHD 7103 A**, in connection with a road traffic accident on 11 of March 2019, at about 09:10 hours along PIE towards Tuas after Bedok Avenue 3, involving our client's motor vehicle no. **SGE 4284 L** and motor vehicle no. **SHD 7103 A** driven by your insured at the material time.

We are instructed that the accident was caused by your insured's negligence and/or management of his motor vehicle. As a result of the accident, our client's motor vehicle

Hack San Lee 701
TOMMY CHOO, MARK GO LLC

per Tom
Advocates & Solicitors

UEN NO : 201523418E

(a law corporation with limited liability)

151 CHIN SWEE ROAD #14-15/16

MANHATTAN HOUSE

SINGAPORE 189876

TEL : (65) 6532 2455

FAX : (65) 6538 9850 (Services of Court Documents By Fax Not Accepted)

EMAIL: thling@tcmg.com.sg

Our Ref : LLH/ing/1148/0419/HSLT

Your Ref : SHD 7103 A

9 APR 2019

M/S COMFORT TRANSPORTATION PTE LTD

383 Sin Ming Drive

Gas Building

Singapore 575717

M/S INDIA INTERNATIONAL INSURANCE PTE LTD

64 Cecil Street #04-00

IOB Building

Singapore 049711

Attn: Motor Claims Department

Dear Sirs,

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We are instructed that the accident was caused by your Insured's negligence and/or management of his motor vehicle. As a result of the accident, our client's motor vehicle was damaged and our client had been put to loss and expenses, particulars of which are as follows:

1 Costs of Repair	\$ 4,700.00
2 Rental (\$150 x 7 days)	\$ 1,050.00
3 Loss of Use (Pre-repair)(\$100 x 2 days)	\$ 200.00
4 Survey Fees	\$ 608.00
5 Disbursement (at this stage)	\$ 93.00
6 Legal Cost (at this stage)	\$ 700.00
	<u>\$ 7,351.00</u>



By Certificate of Posting

(For your attention:without enclosures)

mc 7119030267

BY PDX NO. 8181

PDX Intercompany Exchange Pte Ltd



01000888796

FROM TOMMY CHOO, MARK GO LLC
PDX Box No. **8141**

Send 9/4/19

TOMMY CHOO, MARK GO LLC

Advocates & Solicitors

UEN NO : 201523418E

(a law corporation with limited liability)

151 CHIN SWEE ROAD #14-15/16

MANHATTAN HOUSE

SINGAPORE 169876

TEL : (65) 6532 2455

FAX : (65) 6538 9850 (Services of Court Documents By Fax Not Accepted)

Email: lhling@tcmg.com.sg

A copy each of the following supporting documents is enclosed:

1. Copy of accident report and LTA search;
2. Copy of survey report and invoice and repair bill;
3. Colour photographs pertaining to our client's motor vehicle for your perusal.

We had on 11 March 2019 notified your insurer, M/s India Int'l Ins Pte Ltd about the accident and the pre-repair inspection was conducted.

Please note that if you are insured and you wish to claim from your insurance policy, you should immediately pass this letter to your insurer.

Please note that you should send us an acknowledgment of receipt of this letter within fourteen (14) days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against your insured without further notice to you or your insured.

Please note that if you have a counterclaim against our client arising out of the accident, you are also required to send us a letter giving full particulars of the counterclaim together with the relevant documents within 8 weeks of your receipt of this letter.

Yours faithfully,



Encs.

cc. client

Enquire Vehicle & Owner Information (Vehicle No. SHD7103A As At 11 Mar 2019 / 09:10:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident
Law Firm Case No.: LLH.SGE4284L.HSLT

Current Owner Details

Owner ID Type: Company
Owner ID: 199303821R
Owner Name: COMFORT TRANSPORTATION PTE LTD
Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.: 383
Registered Street Name: SIN MING DRIVE
Registered Unit No.: -
Registered Building Name: GAS BUILDING
Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHD7103A
Make Description/Model: TOYOTA / PRIUS HYBRID 1.8 CVT
Insurance Company Name: INDIA INT'L INS PTE LTD

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Details	
Owner ID Type:	Singapore NRIC
Owner ID:	8800D
Vehicle Details	
Vehicle No.:	SGE4284L
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Mar 2019
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 A
Primary Colour:	Grey
Manufacturing Year:	2005
Engine No.:	1ZZ2477478
Chassis No.:	ZNE100287700
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$19,677.00
Original Registration Date:	16 Mar 2006
First Registration Date:	16 Mar 2006
Transfer Count:	2
Actual ARF Paid:	\$21,645.00
PARF Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Details	
COE Expiry Date:	15 Mar 2026
COE Category:	E - Open Category
COE Period(Years):	10
PQP Paid:	\$50,932.00
COE Rebate Amount:	\$35,666.00
Total Rebate Amount:	\$35,666.00

The information contained herein is correct as at 14 Mar 2019

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	11/03/2019 10:48
Date Of Accident	11/03/2019 09:10
Exact Location Of Accident	PIE /TUAS AFTER BEDOK AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGE4284L
Insured/Policyholder	
Name Of Registered Owner	SIM YEOW CHUAN DAVID
NRIC No	S1308800D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90036281
Alternative Phone No	OFFICE-90036281
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5078082091-02
Cover Note Number	
Driver	
Name of Driver	SIM BAO NAN
NRIC No	S9143593D
Date Of Birth	04/12/1991
Occupation	INDOOR
Date Of Driving Pass	15/01/2013
Driving Experience	6 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91098128
Fax Number	
Contact Number	
Email Address	SIMBAONAN@GMAIL.COM

Address	BLK 106 TAMP ST 11 #10-329
Postcode	521106
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER SKETCH PLAN ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD7103A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLS3001K
-----------------------------	----------

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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.

B. 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.

Policyholder's Signature
Date & Time:

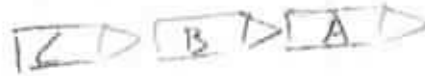
Driver's Signature
(if driver is not the policyholder)
Date & Time:

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



Sketch Plan Pg. 2

SKETCH PLAN



A - SGF 4284L
B - SHD 7103A
C - SLS 3001K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

~~Drive~~ Driving Along PIE (Turns) AFTER Bedok Ave 3
Traffic comes to a sudden stop, Follow suit and brake
The car behind was very near and resulted in a rear-ended
Collision

3 cars were involved in the Accident

1st car - SGF 4284L

2nd car - SHD 7103A

3rd car - SLS 3001K

☐ claim OD / TP at Falcon Air ☐ claim OD / TP Own W/shop ☐ Reporting Only

DECLARATION

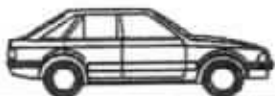
I/We declare the foregoing particulars are true in every respect

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NIDC/TIN No.:





福順利貿易公司 HOCK SOON LEE TRADING CO.

Blk 9004 Tampines Street 92, #01-124 Singapore 528838

Tel: 6785 3422

Bus. Regn No.: 28524100/A

M/S David Sim yew chuan

NO: 34115

Cash Sales

Date: 02/4/2019

Vehicle No: SGE 4284L

Type of Vehicle: Toyota W15

Qty	Description	Unit Price	Amount \$ cts.	
	Lump sum Repair for		4,700	00
	SGE 4282L (Toyota W15)			
E. & O. E.		TOTAL \$	4,700	00

Customer's Chop & Sign.

Hock
Issued by

修理汽車、打嗎呷、噴漆、二手車及ROV驗車等，歡迎惠顧。

Specialist in: Car Repairs, Cars Painting, Panel-Beating, Used Car Dealers & R. O. V. Inspection.



WIN WIN CAR RENTAL

Invoice

SIM BAO NAN
106 TAMPINES ST 11
S(521106)

Invoice No : WWIN0002233
Invoice Date : 20/3/2019
Due Date : 20/3/2019
VHA No : 34358
Referral ID : H038

Description :	Amount
Rental for 7 Day/s @ \$150 per Day \$	1,050.00

Vehicle No : SJQ 689 E

Vehicle Description : Toyota Wish 1.8 A

Rental Period : 13/03/2019 to 20/03/2019

Total Amount Payable : \$ 1,050.00

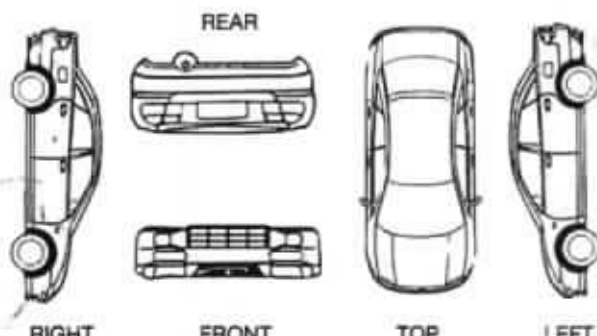

WIN WIN CAR RENTAL

8 Kaki Bukit Ave 4 #06-04 Premier @ Kaki Bukit Singapore 415875
Tel: 6315 8479 H/P: 9833 0807

VHA No: 34358

ROC No: 52987763E

VEHICLE RENTAL AGREEMENT


HIRER'S PARTICULAR Name: (as in I/C) _____ NRIC/PASSPORT No: _____ Address (Res): _____ Name & Address of Employer: _____ Occupation: _____ Driving Exp: _____ Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: _____ Tel: (O) _____ (R) _____ HP: _____		Vehicle No: <u>STB 6872</u> Replace Veh No: _____ Mileage Out: <u>24997</u> Mileage Out: _____ Make & Model: <u>7. WISH</u> Auto / Manual Group: _____ Out : Date: <u>13/1/10</u> Time: _____ HIRE / PERIOD EXPIRY Time: _____ NON-WAIVER EXCESS=\$ <u>3000/-</u>	
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C) _____ NRIC/PASSPORT No: _____ Address (Res): _____ Driving License No: _____ D/L Type: Local / International Issue Date: _____ Date of Birth: _____ Occupation: _____ Driving Exp: _____		CHARGES Daily <u>7</u> @ \$ <u>150</u> per day <u>1050</u> Weekly @ \$ _____ per week Monthly @ \$ _____ per month Hours @ \$ _____ per hour Others @ \$ _____ CDW @ \$ _____ per day/month PAI @ \$ _____ per day/month Delivery/Collection Service SUB-TOTAL \$	
VEHICLE CHECK LIST D - DENTS S - SCRATCHES A - ACCIDENTS  RIGHT FRONT TOP LEFT		PETROL LEVEL Out E 1/4 1/2 3/4 (F) In E 1/4 1/2 3/4 F EXTENSION Misc. TOTAL CHARGES \$	
ACCESSORIES CHECK <input type="checkbox"/> Ashtray <input type="checkbox"/> Cig Lighter <input type="checkbox"/> S/Tyre <input type="checkbox"/> STD Tools <input type="checkbox"/> Jack <input type="checkbox"/> Hub Caps <input type="checkbox"/> Radio/Cass <input type="checkbox"/> CD <input type="checkbox"/> Cartridges		Hirer's Signature  Additional Driver's Signature _____	

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given WIN WIN CAR RENTAL in connection with this agreement is true.

* IMPORTANT

- ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN CAR RENTAL.

RETURN OF VEHICLE. THE HIRER/DRIVER IS REQUIRED TO SIGN IN THE COLUMN " SINGAPORE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN CAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	 SIGNATURE OF HIRER/DRIVER



SINCERE
APPRAISAL SERVICES PTE LTD

SINCERE APPRAISAL SERVICES PTE LTD Co.Reg no: 201800639R

60 Paya Lebar Road #07-41 Paya Lebar Square Singapore 409051

Tel : 6636 4628 Fax : 6636 4638 E-mail : sincereappraisal@gmail.com

INVOICE

Sim Yeow Chuan David
C/O Hock Soon Lee Trading Co.
Blk 9004, Tampines Street 93
#01-124
Singapore 528838

Invoice No: 200319-184
Our ref: 184/TP/2019
Date: 20/3/2019

Claim Type: Third Party
Vehicle Reg No: SGE4284L
Vehicle Make/Model: Toyota Wish 1.8 A

Date of Loss: 11/3/2019
Claimant: Sim Yeow Chuan David

Description	Amount (S\$)
1. Professional Fee (including Transport, 48 Photographs and Miscellaneous charges)	608
Total	608

Singapore Dollar: Six hundred and eight dollars only.

Cheques should be crossed A/C PAYEE and made payable to Sincere Appraisal Services Pte Ltd



Sincere Appraisal Services Pte Ltd



SINCERE

APPRAISAL SERVICES PTE LTD

VEHICLE DAMAGE INSPECTION REPORT

Our Ref: 184/TP/2019

Date: 20/3/2019

REFERENCE

Date of loss: 11/3/2019
Claimant: Sim Yeow Chuan David

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No:	SGE4284L	Make &	Toyota
Reg date:	16/3/2006	Model	Wish 1.8A
Colour:	Grey	Engine No:	1ZZ2477478
Type:	Motor Car	Chassis No:	ZNE100287700
Type of Claims:	Third Party	Odometer No:	190051km
		Engine Cap:	1794cc

CONDITION OF VEHICLE AT THE TIME OF SURVEY (STATIC ONLY)

General Condition:	Good	Steering:	Good	Engine Modification:	Nil
Paint work:	Good	Handbrake:	Good	Pre-accident	
		Footbrake:	Good	Damage:	Nil

CONDITION OF TYRES

Front Left Size:	Yokohama 195/65R15 70%	Front Right Size:	Yokohama 195/65R15 70%
Rear Left Size:	Yokohama 195/65R15 70%	Rear Right Size:	Yokohama 195/65R15 70%

The above percentages represent the remaining life of the tyre threads

COST OF REPAIRS

	Repairer S\$	Adjuster S\$
Parts	\$ 4,366.83	\$ 3,671.28
Labour	\$ 2,690.00	\$ 2,150.00
Calculated Cost (S\$) :	<u>\$ 7,056.83</u>	<u>\$ 5,821.28</u>

Recommended Lump Sum Repair Cost (S\$) : \$ 4,700.00

Date of Assignment: 11/3/2019
Date Inspected: 11/3/2019
Est. repair Period: 06 days

Inspected At: Hock Soon Lee Trading Co.
Blk 9004, Tampines Street 93
#01-124
Singapore 528838

POINT OF IMPACT



BRIEF CIRCUMSTANCES OF ACCIDENT

The Insured's vehicle collided onto the Third Party's vehicle along PIE Expressway (Tuas) after Bedok Avenue 3.

GENERAL DESCRIPTION OF DAMAGES

Our visual inspection of the vehicle revealed that the damages noted are at the rear portion.

SPECIAL REMARKS

We have inspected the actual damages found on the vehicle and recommend the replacement of parts and repairs accordingly. The estimated repair cost is \$7,056.83. The repairer has agreed to undertake the repairs at our adjusted lump sum amount of \$4,700.00.

We have not authorised the repair. Under normal circumstances, estimated **06** working days are required to repair the vehicle.

We are pleased to advise that the inspection work was carried out accordingly, and hereby submit our Inspection Report and photographs.



Automotive Appraiser: Dave Chang

Please note that this report is solely based on our findings at the time and place of inspection. This inspection has been carried out to our best knowledge and ability. Any other liability is hereby excluded.

ANNEX A

REPAIR DETAILS

Recommended Parts

No	Qty	Description	Condition	Repairer's Amount	Adjuster's Amount
1	1	Rear bumper assy	cracked	\$ 859.20	\$ 859.20 68
2	1set	Rear bumper bracket	bent/necessary	\$ 64.60	\$ 64.60
3	1set	Rear bumper retainer	bent/necessary	\$ 97.20	\$ 97.20
4	1set	Rear bumper reflector	necessary/broken	\$ 126.60	\$ 126.60 63.3
5	1	Rear tailgate assy	dented	\$ 1,687.60	\$ 1,687.60 151
6	1	Rear tailgate lock mechanism	bent	\$ 178.60	\$ 178.60
7	1	Rear tailgate lock catch	bent	\$ 65.60	\$ 65.60 X50
8	2	Rear tailgate rubber stopper	necessary	\$ 66.50	\$ 66.50 X51
9	1	Rear tailgate centre logo	necessary	\$ 78.70	\$ 78.70
10	1	Rear left taillamp	bent/cut	\$ 676.90	\$ 676.90 48
11	1	Rear windscreen glass moulding	necessary	\$ 380.20	\$ 380.20 148
12	1	Rear end lower panel	repair	\$ 927.40	\$ -
				\$ 5,209.10	\$ 4,281.70
Less 25%				\$ 1,302.28	\$ 1,070.43
				\$ 3,906.83	\$ 3,211.28
<u>Special Nett Items</u>					
1	10	Rear bumper clips	necessary	\$ 50.00	\$ 50.00 30
2	1	Rear windscreen glass sealant	necessary	\$ 80.00	\$ 80.00 50
3	2	Rear bumper reverse sensor	malfunction	\$ 250.00	\$ 250.00 200
4	1	Rear no plate with garnish	necessary	\$ 80.00	\$ 80.00 X11
				\$ 460.00	\$ 460.00
Total parts				\$ 4,366.83	\$ 3,671.28

ANNEX B

REPAIR DETAILS

Recommended Labour

No	Description	Repairer's Amount	Adjuster's Amount
1	Labour for panel beating, cut, weld, straighten rear affected area and replace rear damaged parts.	\$ 1,000.00	\$ 800.00 500
2	To putty and spray painting rear portion.	\$ 1,000.00	\$ 800.00 500
3	To check rear lighting and wiring.	\$ 50.00	\$ 30.00
4	To remove and install rear tailgate lock mechanism.	\$ 80.00	\$ 60.00
5	To remove and install rear inner garnish and trim to facilitate the repair.	\$ 140.00	\$ 120.00 80
6	To apply anti rust proofing to rear affected area.	\$ 100.00	\$ 80.00 50
7	To remove and install rear windscreen glass to facilitate the repair.	\$ 140.00	\$ 120.00
8	To remove and install rear bumper reverse sensor.	\$ 80.00	\$ 60.00
9	Towing service.	\$ 100.00	\$ 80.00 X
Total labour :		\$ 2,690.00	\$ 2,150.00 5 days

ANNEX C

REPAIR DETAILS

Adjusted Repair Cost

	Repairer's Amount	Adjuster's Amount
Total parts :	\$ 4,366.83	\$ 3,671.28
Total labour :	\$ 2,690.00	\$ 2,150.00
Total repair cost :	\$ 7,056.83	\$ 5,821.28

Adjusted Repair Cost (Lump Sum Repair)

\$ 4,700.00

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	11/03/2019 14:33
Date Of Accident	11/03/2019 09:20
Exact Location Of Accident	ALONG PIE TWDS JURONG AFTER BEDOK NORTH AVE 2 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7103A
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	KOH SAY KOK (XU SHIGUO)
NRIC No	S7800269G
Date Of Birth	08/01/1978
Occupation	OUTDOOR
Date Of Driving Pass	06/10/2000
Driving Experience	18 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	+65-96995503
Fax Number	
Contact Number	
Email Address	CUTIE_DINOSAUR@YAHOO.COM

Address	559 #04-501 JURONG WEST STREET 42
Postcode	640559
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE ATTACH.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

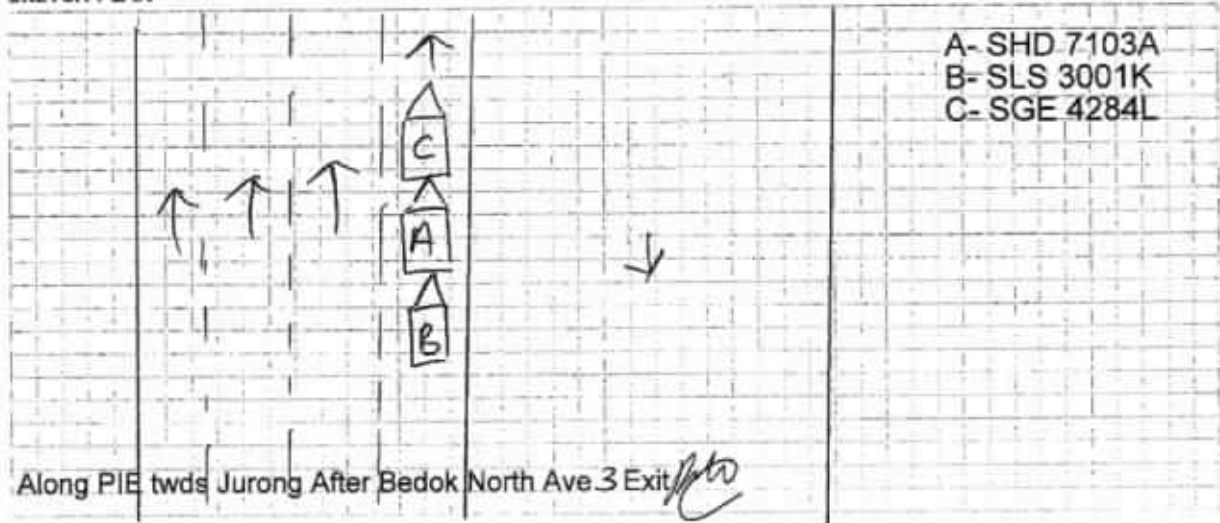
Vehicle Registration Number	SLS3001K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGE4284L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11.03.2019 @ 0920HRS I was travelling straight along PIE twds Jurong after Bedok North Ave 3 Exit with 1 male passenger onboard.
As I was travelling straight veh(C) SGE 4284L stopped and I try to stop but can't stop in time. Suddenly I felt an impact from my taxi rear portion.
As the accident took place too fast I could not take evasive action to prevent the accident.
I have company video and photos at scene to support my claims.
No injury in this accident.
Veh(B) SLS 3001K Male Driver
Veh(C) SGE4284L Male Driver

DECLARATION

I/We declare the foregoing particulars are true in every respect.

TRANSPORTATION PTE LTD
COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11.02.2019 @ 1200hrs

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

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11.02.2019@ 1200hrs

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S68500200 / GST Reg. No.: M400017735

CR

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MD6190324416 Vehicle Registration No : SKD7103A
 Name (as shown in NRIC) : Poh Seng Kok, Xu Shicun NRIC/FIN/Passport No : 078002016
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : 31K 554 Swong Aen Street 43, 004, 501 Singapore 660554
 Contact (Tel) : _____ Mobile No. : 0699 6503
 Email Address : _____
 Date of Accident : 11/3/2019 Time of Accident : 09:20 hrs
 Place of Accident : Pte Aue Swong after Beekok North Ave's Exit
 Insurance Company : Indica International Insurance Pte Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

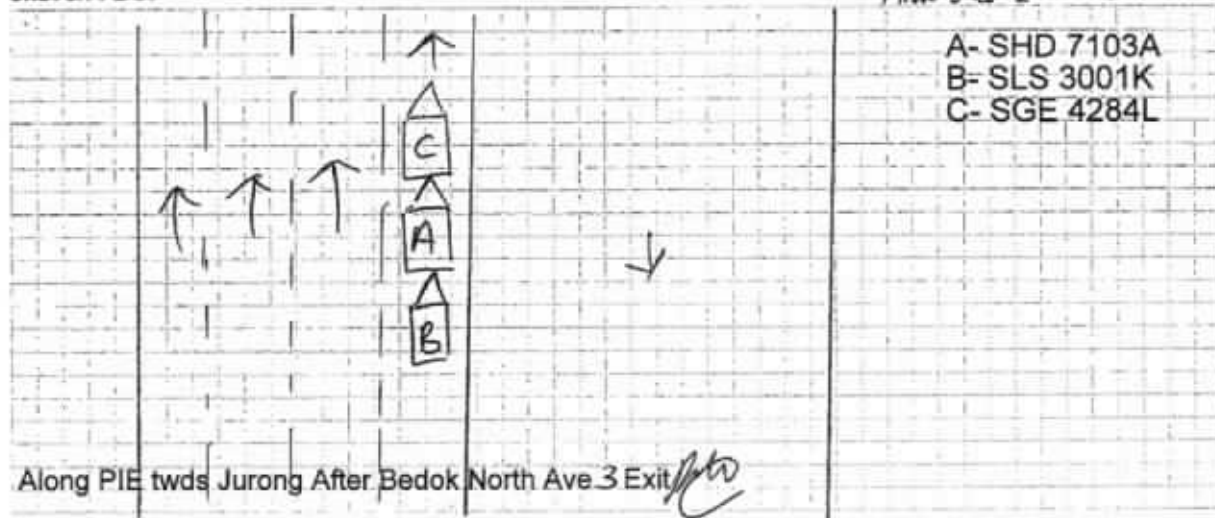
Recan sketch plan (Dr Signature date was 11/3/19

T. S.
 Policyholder / Driver's Signature
 Date: 12 MAR 2019

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

SKETCH PLAN

Amended on 11/31/2019



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11.03.2019 @ 0920HRS I was travelling straight along PIE twds Jurong after Bedok North Ave 3 Exit with 1 male passenger onboard.

As I was travelling straight veh(C) SGE 4284L stopped and I try to stop but can't stop in time. Suddenly I felt an impact from my taxi rear portion.

As the accident took place too fast I could not take evasive action to prevent the accident.

I have company video and photos at scene to support my claims.

No injury in this accident.

Veh(B) SLS 3001K Male Driver

Veh(C) SGE4284L Male Driver

DECLARATION

I/We declare the foregoing particulars are true in every respect.

COMFORT TRANSPORTATION PTE LTD
REG. NO. 199303821R
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11.02.2019 @ 1200hrs

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




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				
INDIA INTERNATIONAL INSURANCE PL			Ref : CS3/III19004575/Gvd3e2-1	
64 CECIL STREET #05-02 IOB BUILDING SINGAPORE 049711			Date : 10-05-2019	
			Code : III2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	SHD 7103A	Veh. Inspected	SGE 4284L	
Policy No.	MCOM0015	Coverage (\$)	0.00	
Claim No.	MCT19030267	Excess (\$)	0.00	
Assign From	STANLEY LAI	Assign Date	16/04/2019	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA WISH	c.c	1794	
Engine No.	HIDDEN	Year of Reg.	2006	
Chassis No.	ZNE100287700	Colour	SILVER	
Odometer	190087	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	195/65 R15	YOKOHAMA	5 mm	
L/H Front Tyre	195/65 R15	YOKOHAMA	5 mm	
R/H Rear Tyre	195/65 R15	YOKOHAMA	5 mm	
L/H Rear Tyre	195/65 R15	YOKOHAMA	5 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	11/03/2019	Inspection Date	14/03/2019	
Survey held at	HOCK SOON LEE TRADING CO BLK 9004 TAMPINES ST 93 #01-124 SINGAPORE 528838			
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:		5 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. SGE 4284L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	REAR BUMPER ASSY	CRACKED	859.20	686.00
1	SET REAR BUMPER BRACKET	BENT / NECESSARY	64.60	64.60
1	SET REAR BUMPER RETAINER	BENT / NECESSARY	97.20	97.20
1	SET REAR BUMPER REFLECTOR	NECESSARY / BROKEN	126.60	63.30
1	REAR TAILGATE ASSY	DENTED	1,687.60	1,071.00
1	REAR TAILGATE LOCK MECHANISM	BENT	178.60	178.60
1	REAR TAILGATE LOCK CATCH	SERVICEABLE	65.60	-
2	REAR TAILGATE RUBBER STOPPER	SERVICEABLE	66.50	-
1	REAR TAILGATE CENTRE LOGO	NECESSARY	78.70	78.70
1	REAR LEFT TAILLAMP	BENT / CUT	676.90	487.00
1	REAR WINDSCREEN GLASS MOULDING	NECESSARY	380.20	148.00
1	REAR END LOWER PANEL	TO REPAIR SEE LABOUR	927.40	-
	LESS 25% DISCOUNT		-1,302.28	-718.60
			3,906.82	2,155.80
<u>SPECIAL NETT ITEMS</u>				
10	REAR BUMPER CLIPS (SN)	NECESSARY	50.00	30.00
1	REAR WINDSCREEN GLASS SEALANT (SN)	NECESSARY	80.00	50.00
2	REAR BUMPER REVERSE SENSOR (SN)	MALFUNCTION	250.00	200.00
1	REAR NO PLATE WITH GARNISH (SN)	NOT NECESSARY	80.00	-
			460.00	280.00
<u>LABOUR</u>				
	LABOUR FOR PANEL BEATING, CUT, WELD, STRAIGHTEN REAR AFFECTED AREA AND REPLACE REAR DAMAGED PARTS. INCLUSIVE OF THE REPAIR OF REAR END LOWER PANEL.		1,000.00	500.00
	TO PUTTY AND SPRAY PAINTING REAR PORTION.		1,000.00	500.00
	TO CHECK REAR LIGHTING AND WIRING.		50.00	30.00
	TO REMOVE AND INSTALL REAR TAILGATE LOCK MECHANISM.		80.00	60.00

Report Ref No. CS3/III19004575/Gvd3e2-1

**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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	TO REMOVE AND INSTALL REAR INNER GARNISH AND TRIM TO FACILITATE THE REPAIR.		140.00	80.00
	TO APPLY ANTI RUST PROOFING TO REAR AFFECTED AREA.		100.00	50.00
	TO REMOVE AND INSTALL REAR WINDSCREEN GLASS TO FACILITATE THE REPAIR.		140.00	120.00
	TO REMOVE AND INSTALL REAR BUMPER REVERSE SENSOR.		80.00	60.00
	TOWING SERVICES.	NOT NECESSARY	100.00	-
			2,690.00	1,400.00
GRAND TOTAL			7,056.82	3,835.80
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				3,050.00

Report Ref No. CS3/III19004575/Gvd3e2-1

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

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

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 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.