

22/03/2012

ASS. REC. BY:

REF: CS/MSG/19006883/Klvd307

Special Instruction:

Survivor: Kalin
MerimenASSIGNMENT (Office)From (Person): Christina Wongof MS19Date/Time: 17.4.19 17:35pm

Estimated Cost: _____

Bill to: _____

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

To Inspect Vehicle No: SHD 4448 AInsured: GBH 9587Zat Workshop m/s Comfortdelgro EngineeringTel: 6214 8300of 51 Loyang DrivePolicy No: 29097289 MKFClaim No: 590821

Sum Insured: _____

Excess: _____

Make of Veh: _____

(Client's Record)

D.O.A. 16.4.2018

CA / REV / REP. / REV 24 HRS

"mg"

H.O.D. Endorsement: _____

Date/Time: 18.4.19

Person Contacted: _____

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SHD 4448 - CC4/LCR 180 23084 / Klvd 392

D.O.A - 23/12/2018

GBH 9587Z - X

22/4/19

Send preli revised via merimen

...CLAIM SUBFOLDER...(New Assignment)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Apr 2019		17 Apr 2019 17:35 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:		Grocery Logistics Of Singapore Pte Ltd, Co. Reg. No.: 199300545M							
Main Claimant:		COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: 199303821R							
Vehicle Reg. No.:		SHD4448A	Date of Loss:	16/04/2019 08:00 - :59 [78 Months and 19 Days From LTA Reg Date (Man Yr)]					
Claim Type:		TP / 590821	Policy/Cover Note No.:	29097289MKF Coverage: 25/09/2018 - 24/09/2019					
Vehicle Reg. No. (Insured):		GBH9587Z	Policy No. (Claimant):						
		Excess:							
Repairer:		ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300							
Handling Insurer:		MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]							
Adjuster:		LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Imm.Advice due 18/04/2019]							
Adj Asg. Remarks:		LIAB: DISPUTE (OI NON REPORTING). CONTACT FAUZY @6214 8319 / 8125 9176.							
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

LKK Auto Consultants Pte Ltd (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park
Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com;assignments@lkkauto.com

To:	MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way #21-01 SGX Centre 2 Singapore 068807	From:	LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
Attn:	Christina Wong	Date:	22 Apr 2019
Preliminary Advice			

Insured Vehicle No	: GBH9587Z	Accident Date	: 16/04/2019
TP Vehicle No	: SHD4448A	Assignment Date	: 17/04/2019
Make	: HYUNDAI SONATA NF	Est. Duration of Repair	: 2.00
Date of Inspection	: 18/04/2019		
Inspection At	: COMFORTDELGRO ENGINEERING PTE LTD (LOYANG) 59 LOYANG DRIVE SINGAPORE 508969		

Point of Impact / General Description of Damages			
The vehicle sustained impact / damages n/s front portion and parts claimed are consistent to the accident.			
Repairer's Estimate (Gross)	:S\$	3,825.80	
Revised Amount	:S\$	1,712.16	
Check Items (Estimated)	:S\$	645.68	
Total	:S\$	2,357.84	
Lump Sum Repair	:S\$		
Total Loss Consideration			
New for Old Value	:S\$		
Pre-Accident Value	:S\$		
COE / PARF Rebate	:S\$		
Salvage Value	:S\$		
Margin for Repair	:S\$		

Remarks	
()	The vehicle is economical/not economical for repair.
(X)	The above survey was conducted on a 'without prejudice' basis.

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	16/04/2019 13:47
Date Of Accident	16/04/2019 08:15
Exact Location Of Accident	JALAN TENAGE BEFORE BLK 651A
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4448A
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	HYUNDAI
Model	SONATA
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

Driver

Name of Driver	TAN GUAN TONG
NRIC No	S1000452G
Date Of Birth	25/04/1948
Occupation	OUTDOOR
Date Of Driving Pass	04/04/1968
Driving Experience	51 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97502265
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 617 HOUGANG AVENUE 8 #07-356
Postcode	530617
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	PASIR RIS N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO POLICE REPORT : T/20190416/2039

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	GBH9587Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	MSIG INSURANCE (SINGAPORE) PTE. LTD.

Nature Of Damage

LEFT FRT

No. Of Passenger (Including Driver)

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 199203821R

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.:

Loke Yee Yang

16/4/19

Sketch Plan Pg. 2

SKETCH PLAN

A = 2HD4448A
 B = GBH9587Z
 Jalan Tenaga before Rik 631A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached police report
 T/20190416/2039

DECLARATION

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

COMFORT TRANSPORTATION PTE. LTD.
CORP. REG. NO. 199703821R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: 16/4/19
NRIC/FIN No.:

GIARMC SketchPlanForm_V3



**SINGAPORE
POLICE FORCE**



T/20190416/2039

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20190416/2039

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/04/2019 11:20		Vide Report No.:	Station Diary No.: 39
Informant's Particulars			
Name of Informant: TAN GUAN TONG		Address: APT BLK 617 HOUGANG AVENUE 8 #07-356 SINGAPORE 530617	
ID Type / ID No.: NRIC NO / S1000452G		Contact No.: Home/Office: Mobile: 97502265	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 70	Date of Birth: 25/04/1948	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: TAXI DRIVER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/04/2019 08:15	Type of Location: Straight Road
Location: Along Road 1 JALAN TENAGA KAKI BUKIT AVE 1 AFTER TURNING RIGHT ONTO JALAN TENAGA, BEFORE BLK 651A				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH9587Z	Van					0
SHD4448A	Car	HYUNDAI	SONATA	Blue	Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190416/2039

2 of 4

Police Station Of Origin
Pasir Ris N.P.C

Report No. T/20190416/2039

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No. 1800-5852999

CONTINUATION OF REPORT

Driver			
Name	TAN GUAN TONG	ID No.	S1000452G
Related Vehicle	SHD4448A (Car)	Contact No.	97502265
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	UNKNOWN	ID No.	NIL
Related Vehicle	SHD4448A (Car)	Contact No.	97310683
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Event Details.

On 16/04/2019 at about 08:15am, I was driving in my taxi bearing the registration number, SHD4448A. I was travelling along Jalan Tenaga. It was single lane road.

I then saw a male subject who was flagging my taxi down at the road side before the coffee shop at Blk 65A Jalan Tenaga. So as I approached the said passenger, I switched on my hazard lights to indicate that I was stopping.

After I had picked up the said passenger, I had moved off.

Suddenly, a Singapore registered van, blue in coloured over took my vehicle on the right side and side swiped my vehicle at the front portion. The said van did not stop and I did not gave chase. I did not manage to get the registration number of the said van. I just stopped my vehicle immediately and got out to make a check. Due to the collision, my front bumper was dislodged and the side bumper above the front right tyre was dented in.

Neither me nor my passengers are injured. My passenger then alighted from my taxi and boarded another taxi. He only provided me with his contact number.

As my taxi is still drivable, I took out the said bumper and placed in my vehicle and drove to the comfort taxi workshop. As I have an in-vehicle camera installed in my vehicle, the workshop staff assisted in retrieve the footage of the accident and managed to get the van registration number. It was GBH9587Z. I was then informed to lodge a traffic accident report.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin;
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999



T/20190416/2039

3 of 4

Report No. T/20190416/2039

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190416/2039

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

4 of 4

Report No. T/20190416/2039

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

Sgt 2 MUHAMMAD ALIF BIN AZALI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

16/04/2019 11:20

Officer In Charge Of Case:

ABDUL KAREEM BIN ABDUL HAGUE

Contact No: 65476079

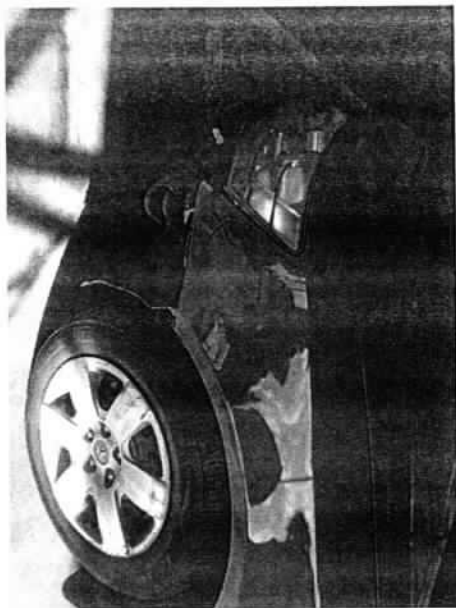
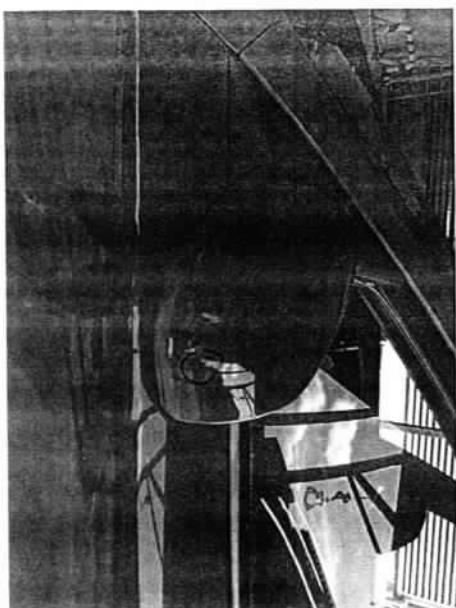
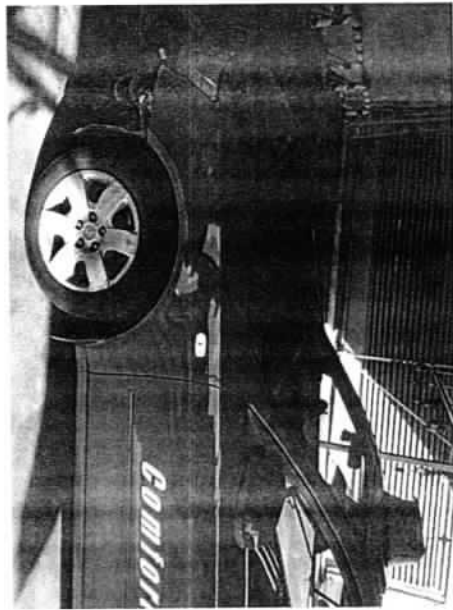
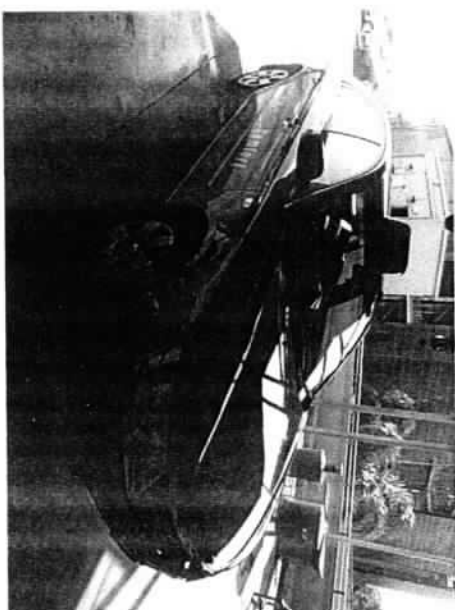
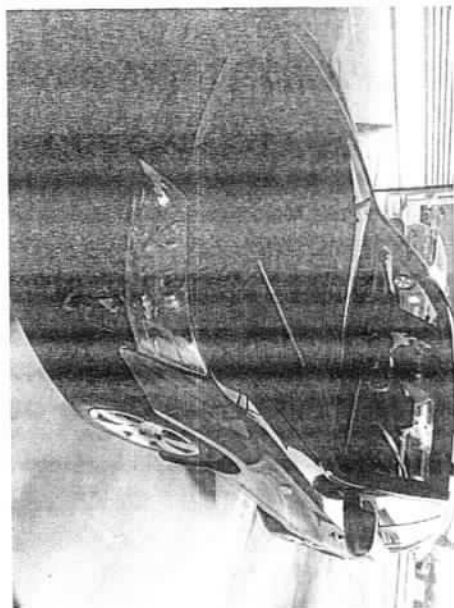
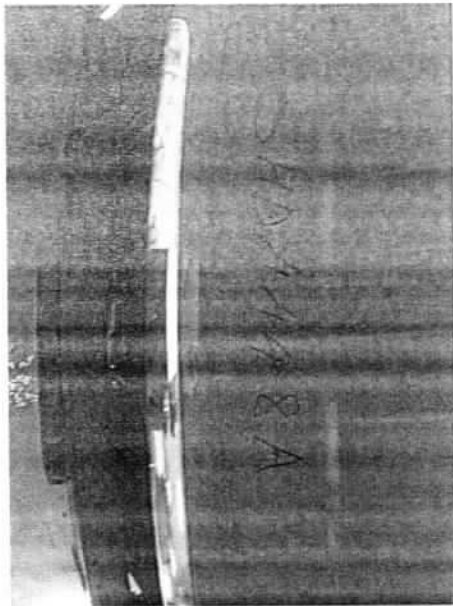
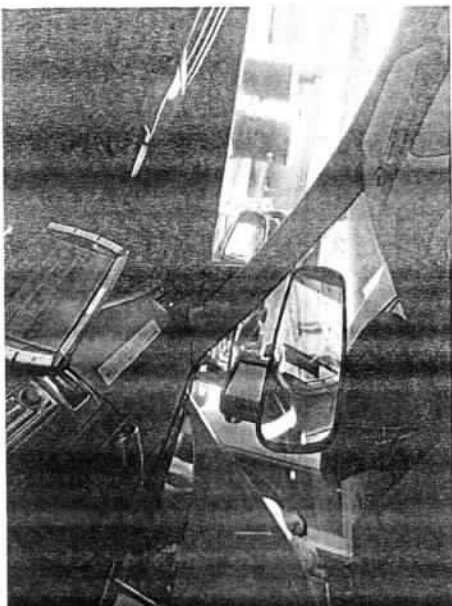
Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**

SIGNATURE



Date/Time: 16.04.2019 16:21

Page : 1

Team: ARC Repair TP(CLS0)1

JOB CARD

Sales Order: 3915114

JC NO.: 305287892

OMER

IS COMFORT TRANSPORTATION PTE LTD

OMER NO. 7010045

1ESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

OUNT CARD NO.

REGN NO.:

SHD4448A

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

SONATA

DATE/TIME IN

16.04.2019 09:25

YR OF MANU.

28.09.2012

TARGET DATE

CHASSIS CODE

KMHET41VMCA830366

COMPLETION DATE/TIME:

JOB DESCRIPTION

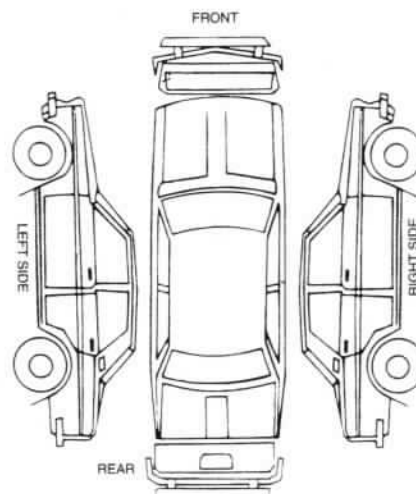
Accident Date: 16.04.2019

NATURE: 3P 16.04.19/ C

S/NO

LABOR CODE

DESCRIPTION



CKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

nowledgement Slip

Exit Pass

No.: SHD4448A

FZ MSIG

Vehicle No.:

SHD4448A

of Service Advisor

Signature/Date

Name of Service Advisor

Date

eturned to Service Reception upon collection

To be kept by Security Guard

REPAIR ESTIMATE*

DATE 4/16/2019 15:53

MAKE :

MODEL : HYUNDAI SONATA

Page 1 of 1

COMFORTDELGRO ENGINEERING

Our Job Ref No : 305287892
Date : 22.04.2019

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SHD4448A - CTPL

Date of Accident : 16.04.2019

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: MSIG -- GBH9587Z

2. The finalized amount shall be:

(a) Spare Parts after List discount \$0.00

(b) Labour Charges \$0.00

Total for Part-By-Part Repair Cost \$0.00

(c) Lumpsum Repair (if applicable)

Total for Lumpsum repair cost after Less: 20% \$1,300.00

Final Lumpsum Repair cost \$1,300.00

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : FAUZY BIN MOKHTAR

Tel : 62148319

Fax : 65468156

Signature : 

Name : Kalvin

Date : 23/4/19

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:




































...CLAIM SUBFOLDER...(Pending for Survey Report)

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'ed	Status
Main	17 Apr 2019		17 Apr 2019 17:35 Edit Adj Rpt	S\$1,300.00 Edit Estimates	S\$1,300.00 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	Grocery Logistics Of Singapore Pte Ltd , Co. Reg. No.: 199300545M								
Main Claimant:	COMFORT TRANSPORTATION PTE LTD , Co. Reg. No.: 199303821R								
Vehicle Reg. No.:	SHD4448A	Date of Loss:	16/04/2019 08:00 - :59 [78 Months and 19 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / 590821	Policy/Cover Note No.:	29097289MKF Coverage: 25/09/2018 - 24/09/2019						
Vehicle Reg. No. (Insured):	GBH9587Z	Policy No. (Claimant):							
		Excess:							
Repairer:	ComfortDelGro Engineering Pte Ltd (Loyang) 59 Loyang Drive, 508969 Loyang - Tel: 6214 8300								
Handling Insurer:	MSIG Insurance (Singapore) Pte. Ltd. (HQ) - Tel: +65 6827 7888 ... [Handled by Christina Wong - 6643 1311]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by KALVIN ANG WEI KUN] ... [Final Rpt due 17/05/2019]								
Adj Asg. Remarks:	LIAB: DISPUTE (OI NON REPORTING). CONTACT FAUZY @6214 8319 / 8125 9176.								
ASSOCIATED MAIL RECEIVED View All Compose Case Mail									
There are no mail for this case.									
ALL ASSOCIATED TASKS View All Search Tasks Create New Task Complete									
Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

Claim Documents

*SHD4448A (590821)
[GBH9587Z]
TP
COMFORT TRANSPORTATION PTE LTD
Apr 16 2019 8:00AM
[Grocery Logistics Of Singapore Pte Ltd]
ComfortDelGro Engineering Pte Ltd

Upload Documents Upload Photos Compose New Letter			View View in Browser	
Assessment Reports			1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	22/04/19 14:15	Adjuster Immediate Advice	 Load HTM	<input checked="" type="checkbox"/>
Photos/Images			3 per page	<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)	Thumbnail	Print
1	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
2	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
3	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
4	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
5	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
6	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
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13	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
14	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
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16	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
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27	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
28	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
29	22/04/19 08:35	General View Left	 Load JPG	<input checked="" type="checkbox"/>
30	23/04/19 08:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
31	23/04/19 08:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
32	23/04/19 08:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
33	23/04/19 08:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>
34	23/04/19 08:39	Reinspection Photo	 Load JPG	<input checked="" type="checkbox"/>

Assessment Reports				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	LKK Auto Consultants Pte Ltd (HQ)		Thumbnail	Print
					<input checked="" type="checkbox"/>
Documentation				1 per page	<input checked="" type="checkbox"/>
No	Finalized On	MSIG Insurance (Singapore) Pte. Ltd. (HQ)		Thumbnail	Print
1	17/04/19 13:36	SHD4448A E-FILE report		Load PDF	
2	17/04/19 13:37	TP PRI NOTICE & GIA REPORT		Load PDF	

Documents Checklist

DOCUMENTS CHECKLIST	Reset	Save	Print
There are no document checklists configured.			

Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)
<div></div>
Show Remarks To: <input type="checkbox"/> Handling Insurer <small>Note: Remarks are private unless you show it to other parties.</small>

LKK Auto Consultants Pte Ltd

(Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

VEHICLE DAMAGE INSPECTION REPORT

Our File No: CS/MSG19006883/K1VD3E2

Date: 07/05/2019

REFERENCE

Handling Insurer: MSIG Insurance (Singapore) Pte. Ltd.

Policy No: 29097289MKF

Claimant Vehicle No : SHD4448A

Insured Vehicle No : GBH9587Z

Date of Loss: 16/04/2019

Nature of Claim: TP

Claim No: 590821

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHD4448A

Make & Model: HYUNDAI SONATA NF, 2.0 CRDI AT ABS 2WD 4DR TURBO (A)

Engine No: D4EA7416887

Reg. Date: 28/09/2012 (Man. Year: 2012)

Chassis No: KMHET41VMCA830366

Colour: Blue

Odometer: 936402 km

Engine Capacity: 1991 cc

Market Value/New Car Price: N/A

Sum Insured (S\$): Market Value/New Car Price

CONDITION OF VEHICLE AT THE TIME OF SURVEY

General Condition: Steering (Serviceable): Yes Footbrake (Serviceable): Yes

Handbrake (Serviceable): Yes Engine Modification: No Pre-accident Condition:

CONDITION OF TYRES

Front Tyre Size: 215/60 R16

Rear Tyre Size: 215/60 R16

Front Left Side: Hankook 6 mm

Rear Left Side: Hankook 6 mm

Front Right Side: Hankook 6 mm

Rear Right Side: Hankook 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	1,777.20	992.16	785.04	44.17
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,160.00	720.00	440.00	37.93
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Calculated Gross Total (S\$)	2,937.20	1,712.16	1,225.04	41.71
Approved Total (Overridden) (S\$)		1,300.00		
(S\$)	2,937.20	1,300.00	1,637.20	55.74
+ GST 7.00/7.00% (S\$)	205.60	91.00	114.60	55.74
Nett Amount (S\$)	3,142.80	1,391.00	1,751.80	55.74

INSPECTION

Date of Assignment: 17/04/2019

Date Inspected: 18/04/2019 Inspected At:

ComfortDelGro Engineering Pte Ltd
(Loyang)
59 Loyang Drive
Singapore 508969

Estimated Period of Repair: 2.0 days

Adjuster: KALVIN ANG WEI KUN**Manager:** VERON CHEN

NOTE: This report represents our findings at the time and place of inspection stated herein. Such inspection has been carried out to the best of our knowledge and ability but any other liability under any other circumstances is hereby expressly excluded.

REPAIR DETAILS

Reference

Part Source:	MRM-SG	Version: 1.0 (Last Synchronised: 07 May 2019)
Parts:	143	HYUNDAI SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO (A) (Catalogue:Merimen Singapore 1.0)
Labour:	Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SHD4448A)	
Validity:	These estimates are valid only if they contain the print code (above) on all estimate pages, running page numbers with the END OF ESTIMATES marker on the last estimate page	
Further Info:	Items/values not in reference catalogue are prefixed with an asterisk *.	

Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER COVER	Deformed	538.80 FL	*538.80 FL
2	1		*FRONT BUMPER BRACKET TOP (RH)	Cracked	22.40 FL	*22.40 FL
3	1		*FRONT BUMPER PROTECTOR (RH)	Repair	29.20 FL	*- FL
4	1		*HEADLAMP (RH)	Serviceable	797.90 FL	*- FL
5	1		*FRONT FENDER (RH)	Buckled	593.00 FL	*593.00 FL
6	1		*FRONT FENDER SHIELD (RH)	Torn	86.00 FL	*86.00 FL
7	1		*FRONT FENDER RETAINER	Serviceable	9.20 FL	*- FL
8	1		*FRONT WHEEL HUB CAP (RH)	Serviceable	145.00 FL	*- FL

F=Franchise part. L=ListItemDisc.

Sub Total (S\$)	2,221.50	1,240.20
- List Item Discount on L Items 20.00/20.00% (S\$)	444.30	248.04
Total Parts (S\$)	1,777.20	992.16

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	PANEL BEATING	New	400.00	300.00
2	SPRAY PAINTING CHARGE	New	600.00	400.00
3	WIRING CHARGES	New	30.00	0.00
4	TUFF KOTE	New	50.00	20.00
5	FRT WHEEL ALIGNMENT	New	80.00	0.00
Gross Labour Cost (\$\$)			1,160.00	720.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >