

ASS. REC. BY:

REF: CS/SMD19006894 71vd30 Special Instruction:

Surveilor: Taufiq

ASSIGNMENT (Office)From (Person): Hwang Chiang Yi of SMD Date/Time: 18.4.2019 9.05 A.M

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SLL 209K Insured: FBH 613Rat Workshop m/s Trans EuroKars Tel: 66310682of 27A Tanjung PenjuruPolicy No: D19MTC 01002945 Claim No: MTD1901919

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 17.4.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS "wp"

Date/Time: 18.4.19 9.36 A.M Person Contacted: Jobi H.O.D. Endorsement: _____Vehicle IN / OUT

Date/Time Action/Instruction (✓) Estimate

SLL 209K - X

FBH 613R - X

22/4/19 Send preli revised via merimen9/5/19 @ 4:30pm Jobi said vehicle has not send in for repair, pending liability7/6/19 @ 11:36am Jobi said vehicle has not send in for repair

Taufik

REF:

Sampo

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record) _____
 Make of Veh: _____
 (Policy Condition) _____
 Remark: The veh had commenced its repair at the time of inspection.
 Bal. or Market Value: _____
 IDAC Accident Rport: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: _____ days Res.: Yes or No
 Lum Sum: _____ % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS _____
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

N/S	O/S

Veh No: SLL 209K Yt Regn: 2015 Jan
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Mazda 3 HB Sport c.c. 1998
 Colour: white A/C: Insured / Std / NI / NA
 Sp. Reading: 54825 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JM 6SM 4478 F. 44391
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 225/40R18
 R: 2.0
 BS DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front Rear
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. D.O.I. 18/4/19
 Survey held at Transwaste by Panyan
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
 o/s Mirror.
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
9/7/19	@ 11opm Jobi said vehicle has not send in for repair
9/7/19	Submit preli report

RECEIVED 09 JUL 2019

Date/Time, File Pass to? Preli. Report
 Final Report

Days Of Repair: 2
 Resurvey No. of Trip: _____

2) ah - typist
 Report Format: merimen
 Lump Sum / I.B.I: (\$)

Add Fee: Site Insp (\$)
 Interview (\$)
 Tech. Invs (\$)
 Weekend (\$)

Survey Fee:	250
Transportation:	
S + PR, SI	
Photos	11
Others	
TOTAL	261

...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		18 Apr 2019 09:05 Assign				New Assignment Cancel Case

Main	Reference	Claim Details	Documents	Show All
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CLAIM SUBFOLDER DETAILS [\[Created by insurer\]](#)

Insured: **ANIRUDH KUMAR PANDEY S/O PARAS NATH, ID: S9604578F**

Main Claimant: **EUROKARS LEASING PTE LTD, Co. Reg. No.: 199200636C**

Vehicle Reg. No.:	SLL209K	Date of Loss:	17/04/2019 07:00 - :59
Claim Type:	TP / CMTD1901919	Policy/Cover Note No.:	D19MTMC01002945 (TP, Fire & Theft)
Vehicle Reg. No. (Insured):	FBH613R	Policy No. (Claimant):	
		Excess:	

Repairer: **Trans Eurokars Pte Ltd - Tanjong Penjuru (HQ) 27A Tanjong Penjuru, 609025 West Coast - Tel:**

Handling Insurer: **Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Hwang Shiang Yi - 6329 5205]**

Adjuster: **LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 30/04/2019]**

Adj Asg. Remarks: **Please conduct the survey on a without prejudice basis.**

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: Sompo Insurance Singapore Pte. Ltd. 50 Raffles Place #05-01/06, Singapore Land Tower Singapore 048623	From: LKK Auto Consultants Pte Ltd 51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park Singapore 408933
Attn: Hwang Shiang Yi	Date: 22 Apr 2019
Preliminary Advice	

Insured Vehicle No : FBH613R	
TP Vehicle No : SLL209K	Accident Date : 17/04/2019
Make : MAZDA 3 HB SPORT	Assignment Date : 18/04/2019
Date of Inspection : 18/04/2019	Est. Duration of Repair : 2
Inspection At : TRANS EUROKARS PTE LTD - TANJONG PENJURU (HQ) 27A TANJONG PENJURU SINGAPORE 609025	

Point of Impact / General Description of Damages

The vehicle sustained impact / damages o/s mirror and parts claimed are consistent to the accident.

Repairer's Estimate (Gross)	:S\$		2,607.80	
Revised Amount	:S\$		1,693.80	
Check Items (Estimated)	:S\$		54.00	
Total	:S\$		1,747.80	
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 repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- () The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- (X) Other comments : The above survey was conducted on a 'Without Prejudice' basis.

> [Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	0636C
Vehicle Details	
Vehicle No.:	SLL209K
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Apr 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 HATCHBACK 2.0 SPORTS A/T 2WD S/R
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	PE20554157
Chassis No.:	JM6BM4478F0144391
Maximum Power Output:	121.0 kW (162 bhp)
Open Market Value:	\$18,867.00
Original Registration Date:	12 Jan 2015
First Registration Date:	12 Jan 2015
Transfer Count:	1
Actual ARF Paid:	\$8,867.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Jan 2025
PARF Rebate Amount:	\$6,650.00
Intended COE Rebate Details	
COE Expiry Date:	11 Jan 2025
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$76,904.00
COE Rebate Amount:	\$42,553.00
Total Rebate Amount:	\$49,203.00

The information contained herein is correct as at 22 Apr 2019

OK



HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M Z 400

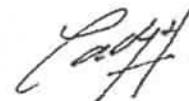
<p>COMPREHENSIVE COMMERCIAL MOTOR</p> <p>CERTIFICATE NO. 999994440/100788489-00000</p> <p>1) VEHICLE REGISTRATION NO. SLL209K</p> <p>2) NAME OF INSURED Eurokars Leasing Pte Ltd</p> <p>3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 1 Sep 2018</p> <p>4) DATE OF EXPIRY OF INSURANCE 31 Aug 2019</p> <p>5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *</p> <p style="margin-left: 40px;">Any person who is driving on the Insured's order or with their permission.</p> <p style="margin-top: 20px;">Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p> <p>6) LIMITATION AS TO USE *</p> <p style="margin-left: 40px;">Use for the carriage of passengers or goods in connection with the Insured's business. Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. The Policy does not cover</p> <p style="margin-left: 40px;">1) Use for racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p> <p style="margin-top: 20px;">LOSS OF USE NOT INCLUDED</p> <p style="margin-left: 40px;">* NAMED DRIVER N/A</p> <p>HIRE PURCHASE COMPANY MayBank</p> <p style="font-size: small;">* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>	<p>OWN DAMAGE EXCESS S\$1,200.00 (1)</p> <p>WINDSCREEN EXCESS S\$100.00 <small>(for policies with effect from 1st November 2002)</small></p> <p>SUM INSURED S\$1.00</p> <p>INSURING WITH COE/PARF YES</p>
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I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 21 Sep 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD.

504028-010
ARF (ASIA PACIFIC) PTE LTD
7 MAXWELL ROAD #01-100
ANNEX B MND COMPLEX
SINGAPORE 069111



Authorized Representative

ORIGINAL

SSPYTP

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of a man

Licence Number: **S7211034Z**
 Name: **REGINALD JUDE OW SIEW KEONG**

Birth Date: **30 Mar 1972**
 Issue Date: **19 Feb 2014**

Barcode: 002275243H

REPUBLIC OF SINGAPORE 

IDENTITY CARD NO. **S7211034Z**

Portrait of a man

Name: **REGINALD JUDE OW SIEW KEONG**
 区 兆 强

Race: **CHINESE**
 Date of birth: **30-03-1972** Sex: **M**
 Country of birth: **SINGAPORE**

Barcode: S7211034Z

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	EFFECTIVE DATE
Class 3	Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	19 Feb 2014

NP 428A

Barcode: Licence No: S7211034Z

4700819

Barcode

NRIC No: **S7211034Z**

Portrait of a man

Date of issue: **30-03-2011**

BLK 27 ANCHORVALE CRESCENT #17-36
SINGAPORE 544657

NRIC No: **S7211034Z** Date: **03/12/2017**

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	17/04/2019 11:08
Date Of Accident	17/04/2019 07:20
Exact Location Of Accident	TRAFFIC LIGHT AT 27 WEST COAST HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL209K
Insured/Policyholder	
Name Of Registered Owner	EUROKARS LEASING PTE LTD
Co Reg No	199200636C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63633003
Vehicle Particulars	
Manufacturer	MAZDA
Model	3-2.0 (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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	
Driver	
Name of Driver	REGINALD JUDE OW SIEW KEONG
NRIC No	S7211034Z
Date Of Birth	30/03/1972
Occupation	INDOOR
Date Of Driving Pass	19/02/2014
Driving Experience	5 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96702999
Fax Number	
Contact Number	
Email Address	JUDEOW@EUROKARS.COM.SG

Address	BLK 27 ANCHORVALE CRESCENT #17-36
Postcode	544657
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - STAKEHOLDER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	
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

KINDLY REFER TO THE ATTACHED SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBH613R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

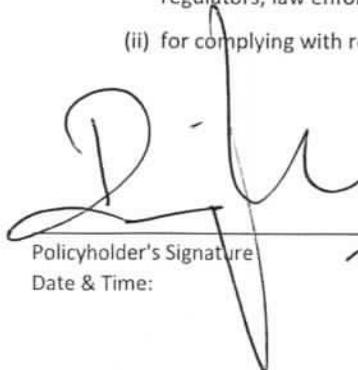
SKETCH PLAN

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.
8. **Consent under the Personal Data Protection Act (PDPA)**

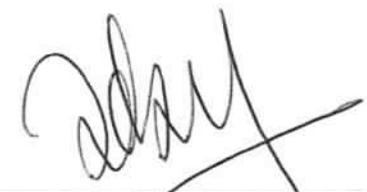
I understand, acknowledge, agree and consent that:

- (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.

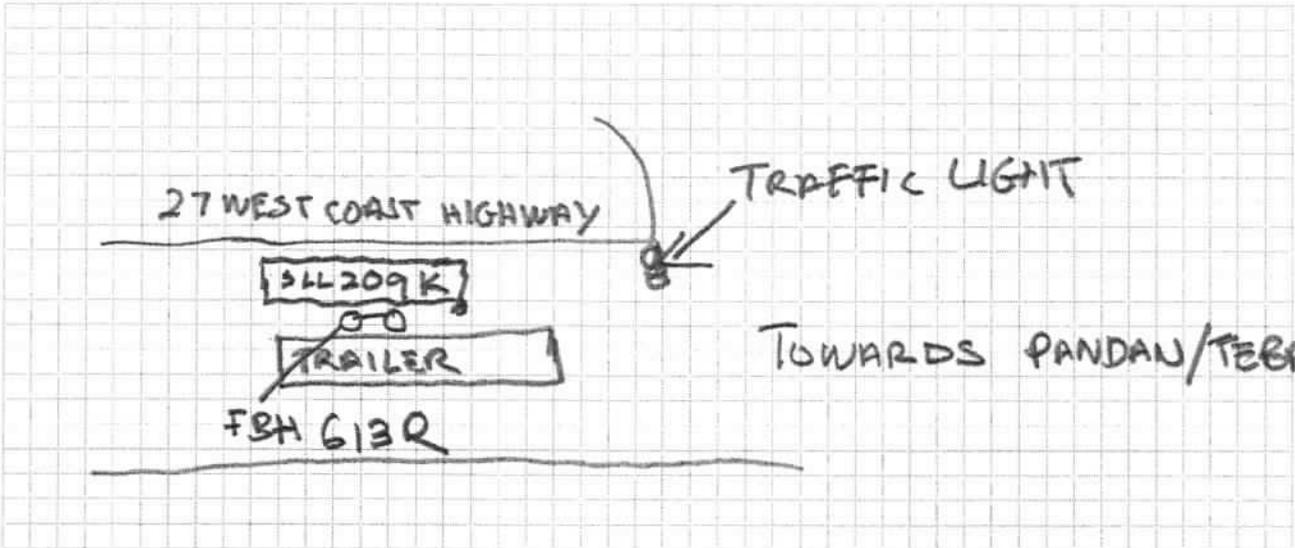

Policyholder's Signature
Date & Time:




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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE NO: SLL 209 K

ACCIDENT DATE: 17/4/2019	CONTACT NUMBER: 96702999
ACCIDENT TIME: 0717 HRS	EMAIL: judeow@eurokars.com.sg
LOCATION: TRAFFIC LIGHT AT 27 WEST COAST HIGHWAY TOWARDS PANDAN /TEBAN .	

MY VEHICLE WAS STATIONARY AT THE TRAFFIC WHEN FBH 613R LANE SPLIT BETWEEN MY VEHICLE AND A TRAILER AND HIT MY RIGHT WING MIRROR .

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLICY.

PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

PLEASE STATE: CLAIM OWN POLICY CLAIM THIRD PARTY 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:
NRIC/FIN No.:



ESTIMATE COST OF REPAIRS

SOMPO INSURANCE P/L 50 RAFFLES PLACE #05-01/06 SINGAPORE LAND TOWER SINGAPORE 048623 ATTN. : MOTOR CLAIMS FAX :		NAME : EUROKARS LEASING PTE LTD ADDRESS : 12 Sungei Kadut Ave Singapore 729648 TEL : 63633003	WIP : EXCESS : DATE: 17-Apr-19
VEH NO :	SLL209K	DATE IN :	CONTACT PERSON : JOBI THOMAS 63310682
CHASSIS NO :	JM6BM4478F0144391	MILEAGE :	TYPE OF CLAIM : THIRD PARTY CLAIM
MODEL :	MAZDA3 2.0L HB	DATE REG.: 12-Jan-15	POLICY NO. :

NATURE OF WORKS

Parts Description

NO	QTY	REVISED	PRICES
1	1	cut ✓	\$ 124.50
2	1	cut ✓	\$ 97.70
3	1	cut ✓	\$ 446.70
4	1	use ✓	\$ 13.10
5	1	?	\$ 60.00
TOTAL PARTS			\$ 742.00
LESS 10%			\$ 74.20
TOTAL PARTS COST			\$ 667.80

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before after spray painting
- To display (part/part) during resurvey
- Parts prices are subject to confirmation
- Third party survey on a "Without Prejudice" basis
- No illegal modification is allowed
- Supplier of parts must be resurveyed and

Labour Description

1	MZ-BR-FRONT1	TO REPLACE DOOR MIRROR RH. REPAIR ALL AREAS AFFECTED BY THE ACCIDENT.	330	\$ 660.00
2	MZ-SP-SFRTO1	TO RESPRAY COVER DOOR MRIRROR RH.	Sp 400	\$ 630.00
3	MZ-BR-ELECTR	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.	150	\$ 250.00
4	MZ-BR-REPROG	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.	180	\$ 350.00
5	MZ-BR-SUNDRI	SUNDRIES.	20 NETT	\$ 50.00

Handwritten notes:
 Dun 225/40R18
 Tanpin 2749 5749
 - up
 18/4/19 @ 945
 Resurvey before paint
 02 days
 sure lkk auto.com

TOTAL LABOUR	\$ -	\$ 1,940.00
TOTAL PARTS	\$ -	\$ 667.80
TOTAL	\$ -	\$ 2,607.80
LESS EXCESS	\$ -	\$ -
TOTAL AFTER EXCESS	\$ -	\$ -
GST 7%	\$ -	\$ -
GRAND TOTAL	\$ -	\$ -

REMARKS:

THIS IS ONLY AN ESTIMATE FROM VISUAL INSPECTION AND SHOULD THERE BE MORE DAMAGES FOUND DURING THE PROCESS OF REPAIRING, YOU WILL BE INFORMED BEFORE THE REPAIRS ARE BEING CARRIED OUT. TAKE NOTE THAT SHOULD YOU DECIDE NOT TO PROCEED WITH THE REPAIRS, A **QUOTATION FEE OF \$400** WILL BE APPLIED ACCORDINGLY FOR MAN-HOURS INVOLVED IN SOURCING FOR PARTS PRICE AS WELL AS LABOUR CHARGES.

Authorised Signature

...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		18 Apr 2019 09:05 Edit Adj Rpt	S\$1,693.80 Edit Estimates	S\$1,693.80 View Rpt		Pending for Survey Report Cancel Case

Main	Reference	Claim Details	Documents	Show All					
CLAIM SUBFOLDER DETAILS [Created by insurer]									
Insured:	ANIRUDH KUMAR PANDEY S/O PARAS NATH , ID: S9604578F								
Main Claimant:	EUROKARS LEASING PTE LTD , Co. Reg. No.: 199200636C								
Vehicle Reg. No.:	SLL209K	Date of Loss:	17/04/2019 07:00 - :59 [51 Months and 5 Days From LTA Reg Date (Man Yr)]						
Claim Type:	TP / CMTD1901919	Policy/Cover Note No.:	D19MTMC01002945 (TP, Fire & Theft)						
Vehicle Reg. No. (Insured):	FBH613R	Policy No. (Claimant):							
		Excess:							
Repairer:	Trans Eurokars Pte Ltd - Tanjong Penjuru (HQ) 27A Tanjong Penjuru, 609025 West Coast - Tel:								
Handling Insurer:	Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Hwang Shiang Yi - 6329 5205]								
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 30/04/2019]								
Adj Asg. Remarks:	Please conduct the survey on a without prejudice basis.								
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

***SLL209K (CMTD1901919)**
[FBH613R]
TP
EUROKARS LEASING PTE LTD
Apr 17 2019 7:00AM
[ANIRUDH KUMAR PANDEY S/O PARAS NATH]
Trans Eurokars Pte Ltd - Tanjung Penjuru

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Documents Checklist

DOCUMENTS CHECKLIST			<input type="button" value="Reset"/>	<input type="button" value="Save"/>	<input type="button" value="Print"/>
There are no document checklists configured.					
Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)					
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/SMO19006894/T1VD3E2

Date: 12/07/2019

REFERENCE

Handling Insurer: Sompo Insurance Singapore Pte. Ltd. Policy No: D19MTMC01002945

Claimant Vehicle No : SLL209K **Insured Vehicle No :** FBH613R

Date of Loss: 17/04/2019 Nature of Claim: TP Claim No: CMTD1901919

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLL209K**
 Make & Model: MAZDA 3, 2.0 HATCHBACK SPORTS 2WD S/R (A) Engine No: PE20554157
 Reg. Date: 12/01/2015 (Man. Year: 2014) Chassis No: JM6BM4478F0144391
 Colour: White Odometer: 54825 km
 Engine Capacity: 1998 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: Yes

CONDITION OF TYRES

Front Tyre Size: 225/40 R18 Rear Tyre Size: 225/40 R18
 Front Left Side: Dunlop 6 mm Rear Left Side: Dunlop 6 mm
 Front Right Side: Dunlop 6 mm Rear Right Side: Dunlop 6 mm

The above values represent the remaining tyre treads depth

COST OF CLAIMS	Repairer's	Adjuster's	Difference	Diff %
Parts	717.80	633.80	84.00	11.70
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,890.00	1,060.00	830.00	43.92
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
Gross Total (S\$)	2,607.80	1,693.80	914.00	35.05
+ GST 7.00/7.00% (S\$)	182.55	118.57	63.98	35.05
Nett Amount (S\$)	2,790.35	1,812.37	977.98	35.05

INSPECTION

Date of Assignment: 18/04/2019
 Date Inspected: 18/04/2019 Inspected At: Trans Eurokars Pte Ltd - Tanjong Penjur
 (HQ)
 27A Tanjong Penjur
 Singapore 609025

Estimated Period of Repair: 2.0 days

Adjuster: MOHD TAUFIKH BIN HAMID

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.

THE VEHICLE HAS NOT SEND IN FOR REPAIRS.

(REPAIR COST NOT CONCLUDE)

(EXCLUDE CHECK ITEMS S\$54.00 NETT)

REPAIR DETAILS

Reference	
Part Source: MRM-SG	Version: 1.0 (Last Synchronised: 12 Jul 2019)
Parts: 144	MAZDA 3 2.0 HATCHBACK SPORTS 2WD S/R (A) (Catalogue:Merimen Singapore 1.0)
Labour: Repairer's	(Price-denominated Standard List)
Print Code:	(Unsubmitted, no print-code for SLL209K)
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		*WING MIRROR COVER RH	Cut	124.50 FL	*124.50 FL
2	1		*WING MIRROR LAMP RH	Cut	97.70 FL	*97.70 FL
3	1		*WING MIRROR HOUSING RH	Cut	446.70 FL	*446.70 FL
4	1		*WING MIRROR GASKET RH	Necessary	13.10 FL	*13.10 FL
5	1		*WING MIRROR GLASS RH	* Check	60.00 FL	*- FL
6	1		*SUNDRIES	Necessary	50.00 FS	*20.00 FS
Sub Total (S\$)					792.00	702.00
- List Item Discount on L Items 10.00/10.00% (S\$)					74.20	68.20
Total Parts (S\$)					717.80	633.80

F=Franchise part. S=SpcNett. L=ListItemDisc.

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
Labour Items				
1	TO REPLACE DOOR MIRROR RH. REPAIR ALL AREAS AFFECTED BY THE ACCIDENT	New	660.00	330.00
2	TO RESPRAY COVER DOOR MIRROR RH	New	630.00	400.00
3	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING	New	250.00	150.00
4	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS	New	350.00	180.00
Gross Labour Cost (S\$)			1,890.00	1,060.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >