

REF: ES3/ASM19001959/Gvcd3-1^{2K}

Special Instruction:

↓/S: \$ 17,100.00

Third Parties:

Claimant:

Surveyor: PAR Automotive Consultancy

Workshop: Precision moments

From (Person): Xin Yi of Sca Hong Date/Time: 14/4/19
Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SME 99K Insured: SBH 10102

at Workshop m/s Precision machines Tel: 8742 7297

of G8 Kenji Buleit Ave 6 # 01-02

Policy No: _____ Claim No: 11-26851

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28/01/2019

(Client's Record)

H.O.D. Endorsement/Date: _____

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original 7 days)

Date/Time: 3/5/19 Submit Final Fig 6900, 7 days (Red \$1000 / 60%; Original days)

Date/Time	Action/Instruction
-----------	--------------------

SME 99K-CR3/ASM 10/11/2009/Good 202

DATA: 25/1/12

Serial 10102 - CS3/ASM 1460/084/Auf 3rd

Q. No. 28/1/12

2/5/2019

URGENT

Para(1) : Parts found not replaced (To highlight *R or UB, LR, Etc*)

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)
--

RECEIVED 03 MAY 2019

Para(3) : Nett Value

Market Value :

Salvage Value :

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time 3/5- typist File Pass to

2) Date/Time _____ File Return to _____

3) Date/Time _____ File Pass to _____

4) Date/Time _____ File Return to _____

5) Date/Time _____ File Pass to _____

6) Date/Time _____ File Return to _____

• 22002000

ASS. REC. BY: _____ REF: CS3 / ASM19001959 / Gcd3e2 1 Instruction: _____

Survivor: GB ASSIGNMENT (Office)
 From (Person): Liu Yiwen of ASM (AXA) Date/Time: 30/01/2019

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SME 99K Insured: S8H 100Z
 at Workshop m/s Precision Motorworks Tel: 8742 7247
 of 68 Kaki Bukit Ave 6 #01-03

Policy No: _____ Claim No: S9M01C6M

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28012019
 (Client's Record)

CA / REV / REP. / REV 24 HRS WPI

Date/Time: 3002019 1040am Person Contacted: John H.O. of Endorsement: _____
 Vehicle IN/OUT

Date/Time	Action/Instruction (X) Estimate
	<u>SME 99K - X</u>
	<u>S8H 100Z - X</u>

Surveyor

MS
XAL

REF: AXA

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD: ☒ TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: _____
at Workshop n/s: Precision Motorworks
of _____
Insured: _____
Policy No: _____
Claims No: _____
Sum Insured: _____ Excess: _____
(Client's Record)
Make of Veh: _____

(Policy Condition)
Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____
IDAC Accident Report: _____ Consistent?: Yes or No
GIA / PR Seen: _____ Consistent?: Yes or No
Est. Repairs: 7 days Res: Yes or No
Lum Sum: 20 % 3 Val: Yes or No
CA / REV / REP. / 24 HRS
Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SME 99 K Yr Regn: 25 Jan 2017
Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Merce CLA 180 c.c. 1595
Colour: Black A/C: Insured / Std / NI / NA
Sp. Reading: 29955 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: WDD 1173422 N 414038
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: 225/40 R 18
R: 11
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Continental
Front: _____ Rear: _____
R/Bal: 6 mm R/Bal: 6 mm
L/Bal: 6 mm L/Bal: 6 mm
D.O.A. _____ D.O.I. 30-01-19
Survey held at: w/s 4pm
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
o/s GA
The ☒ U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>\$7000 - \$8000</u>

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

1) _____
Date/Time, File Return to?
2) _____

Report Format: PR3
Lump Sum / I.B.I: (\$ _____)

Days Of Repair: 7
Resurvey No. of Trip: -

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

Survey Fee:	<u>100</u>
Transportation:	_____
Photos	_____
Others	_____
TOTAL	<u>100</u>

Nivitha (LKK Auto)

From: Xin Yi <xinyi@seahong.com.sg>
Sent: Sunday, 14 April 2019 5:28 PM
To: 'Admin-D (LKKAuto)'; 'Admin A'
Cc: steven@seahong.com.sg; 'Chee Kiong'; samson@seahong.com.sg;
amanda@seahong.com.sg; june@seahong.com.sg; christina@seahong.com.sg
Subject: [SOP file ref: 19.26851] [SME 99K]

Dear Nivitha

CLAIMANT :	HO SEIH CHEN REBECCA (OWNER & DRIVER)
CLAIMANT VEHICLE NO.:	SME 99K
ALLEGED ACCIDENT DATE:	28 JANUARY 2019
AXA VEHICLE NO.:	SBH 1010Z

We act for AXA Insurance Pte Ltd for the above matter.

We understand that you were engaged to survey the claimant's vehicle.

The claimant has issued their LOD and their surveyor's report. Copies of the relevant documents can be downloaded via <https://1drv.ms/b/s!AtyQ5g-oo66hjgFL7xB-d4OZTTOIMQ>.

We have requested for coloured photographs of the Claimant's vehicle in the survey report. We will forward once we receive the same.

Please let us hear from you on the following: -

- If you have conducted post-repair inspection already, please let us have your survey report urgently.
- If you have not conducted post-repair inspection, please let us arrange for inspection with the claimant's solicitor and let us have your survey report in due course.

May we hear from you on the above soonest.

Thanks & Best Regards

Heng Xinyi

(Secretary to Mr Tan Chee Kiong)

Seah Ong & Partners LLP

36 Robinson Road

#12-03 City House

Singapore 068877

Tel: 6536 5369

Fax: 6536 5811

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VISION LAW LLC

Advocates & Solicitors - Notary Public - Commissioner for Oaths
Agents for Trade Marks

(Incorporated with Limited Liability)

ERIC NG CHING BOON
WONG KENG LEONG RAYNEY
AUDREY WONG SU-HSIEN
PAUL YAP TAI SAN
ANJALI D/O MUNIANDY
SEGA PARAM
ANG KIM NOI DIANE
RAVENDRA KRISHNASAMY
JANICE HAN JIA LIN
TAN YINGXIAN SELWYN
CHEONG YUNHUI, CLARISSA
EDISON TAM CHYI EU
SONIA LIM WEI LEI

Unique Entity Number 2200721148H

HEAD OFFICE

133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

Branch : 490 Ton Payoh Lorong 6
#03-11 HDB Hub
(Biz 3 Lobby 1)
Singapore 310490

HEAD OFFICE

TEL : (65) 65342811 (Hunting)
FAX : (65) 65356802
EMAIL : jenniferguay@visionlawllc.com

Branch :
TEL: 63580703
FAX: 63580703

60140904

WHEN REPLYING PLEASE QUOTE OUR REFERENCE - Please reply to HEAD OFFICE for this matter

Our Ref : AW1-jgv-ins-P48-109468-19(jw) (jenniferguay@visionlawllc.com)
Your Ref : SBH 1010 Z

21st March 2019

AXA INSURANCE SINGAPORE PTE LTD
8 Shenton Way
#27-01/02, AXA Tower
Singapore 068811

GOH AYE LIN IRENE
7A Charlton Road
Singapore 593558



**WITHOUT PREJUDICE
BY HAND ONLY**

BY POST ONLY
[For your information only]

Dear Sir,

CLAIMANT: Ho Seih Chen Rebecca
ACCIDENT INVOLVING SME 99 K & SBH 1010 Z ON 28-Jan-2019 AT CARPARK TE 25
AT ABOUT 10:40 HRS

We act for **Ho Seih Chen Rebecca** who was the driver as well as the owner of vehicle no. **SME 99 K** in the above accident. We understand that you were the insurers of **SBH 1010 Z** at the material time. We are instructed that the accident was caused entirely by your insured driver's negligence.

Subject to our client's confirmation and subject to revision, we now quantify our clients' damages as follows:-

1)	Whiplash Injury	\$ 6,000.00
2)	Unpaid MC (7 days at \$100.00 per day)	\$ 700.00
3)	Medical expenses	\$ 30.00
4)	Transportation Fee	\$ 100.00
5)	Cost of Repair	\$18,297.00
6)	Loss of Use for 7 days at \$250.00 per day	\$ 1,750.00
7)	Pre Repair Loss of Use (2 Days)	\$ 500.00
8)	Survey report fees	\$ 987.00
9)	Police & GIA & LTA search / report fees	\$ 70.00
10)	Medical report fee	\$ 150.00
11)	Public Trustee	\$ 225.00
12)	Costs and GST 7%	\$ 3,210.00
13)	Photocopy, facsimile and other incidentals	\$ 100.00
		\$32,119.00

NB.: Any settlement of offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude our client from claiming injury-related damages arising from this accident.

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Unique Entity Number: 200721148H

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Branch:
TEL: 63580703
FAX: 63580707 (Central)

60140904

WHEN REPLYING PLEASE QUOTE OUR REFERENCE - Please reply to HEAD OFFICE for this matter

Our Ref : AW1-jgv-ins-P48-109468-19(jw) (jenniferguay@visionlawllc.com)
Your Ref : SBH 1010 Z

21st March 2019

AXA INSURANCE SINGAPORE PTE LTD
8 Shenton Way
#27-01/02, AXA Tower
Singapore 068811

GOH AYE LIN IRENE
7A Charlton Road
Singapore 593558



**WITHOUT PREJUDICE
BY HAND ONLY**

BY POST ONLY
[For your information only]

Dear Sir,

CLAIMANT: Ho Seih Chen Rebecca
ACCIDENT INVOLVING SME 99 K & SBH 1010 Z ON 28-Jan-2019 AT CARPARK TE 25
AT ABOUT 10:40 HRS

We act for **Ho Seih Chen Rebecca** who was the driver as well as the owner of vehicle no. **SME 99 K** in the above accident. We understand that you were the insurers of **SBH 1010 Z** at the material time. We are instructed that the accident was caused entirely by your insured driver's negligence.

Subject to our client's confirmation and subject to revision, we now quantify our clients' damages as follows:-

1)	Whiplash Injury	\$ 6,000.00
2)	Unpaid MC (7 days at \$100.00 per day)	\$ 700.00
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13)	Photocopy, facsimile and other incidentals	\$ 100.00
		\$32,119.00

NB.: Any settlement of offer is on the express condition that this settlement is in respect of our client's claim for property-related damages only and shall not preclude our client from claiming injury-related damages arising from this accident.

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1/29/2019

Vehicle Hub

Enquire Vehicle & Owner Information (Vehicle No. SBH1010Z As At 28 Jan 2019 / 00:00:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: P48

Current Owner Details

Owner ID Type: Singapore NRIC

Owner ID: S1263252E

Owner Name: NG KIM ENG

Registered Address Type: HDB / HUDC

Registered Block/House No.: 538

Registered Street Name: HOUGANG STREET 52

Registered Unit No.: # 08 - 76

Registered Building Name:

Registered Postal Code: 530538

Current Vehicle Details

Vehicle No.: SBH1010Z

Make Description/Model: NISSAN / SUNNY 1.6EXM

Insurance Company Name: AXA INSURANCE PTE LTD

MSME18012251 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 28/01/2019 16:14
SUBMITTED BY: Chua Pei Ying

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	28/01/2019 16:14
Date Of Accident	28/01/2019 10:40
Exact Location Of Accident	CARPARK TE 25
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME99K
Insured/Policyholder	
Name Of Registered Owner	HO SEIH CHEN
NRIC No	S7831388I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88130099
Alternative Phone No	OFFICE-88130099
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA 180

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
Fleet Policy	NO
Policy Number	5102488929

Cover Note Number

Driver

Name of Driver	HO SEIH CHEN REBECCA
NRIC No	S7831388I
Date Of Birth	22/10/1978
Occupation	INDOOR
Date Of Driving Pass	11/07/2018
Driving Experience	0 YEAR AND 6 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-88130099
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 145 JALAN BUKIT MERAH #03-1104
 Postcode 160145
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER --
 Vehicle Registration Number of Driver's Own Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD ON 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 2
 Was any body injured in the Accident? YES
 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) 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

ON 28/01/2019 AT AROUND 10.40AM, I WAS TRAVELLING AT CARPARK TE25. SUDDENLY, A WHITE CAR (SBH1010Z) DASHED OUT FROM THE CARPARK LOT. I TRIED TO AVOID BUT NOT IN TIME. I IMMEDIATELY WENT DOWN FROM MY CAR AND FOUND OUT MY CAR FRONT PORTION WAS DAMAGED. I ALSO OFFER TO EXCHANGE PARTICULARS WITH THE OTHER PARTY BUT HE DIDN'T WANT TO. I FELT SOME PAIN ON MY RIGHT NECK AND RIGHT SHOULDER.

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 SBH1010Z
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 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)

DETAILS OF INJURED PERSON 1

Name HO SEIH CHEN REBECCA
Approximate Age
Injuries Sustain
Injured person in which vehicle? SME99K
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

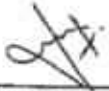
Sketch Plan Pg. 1


SKETCH PLANIMPORTANT 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 Authorized 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 regulate 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 lodging 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:

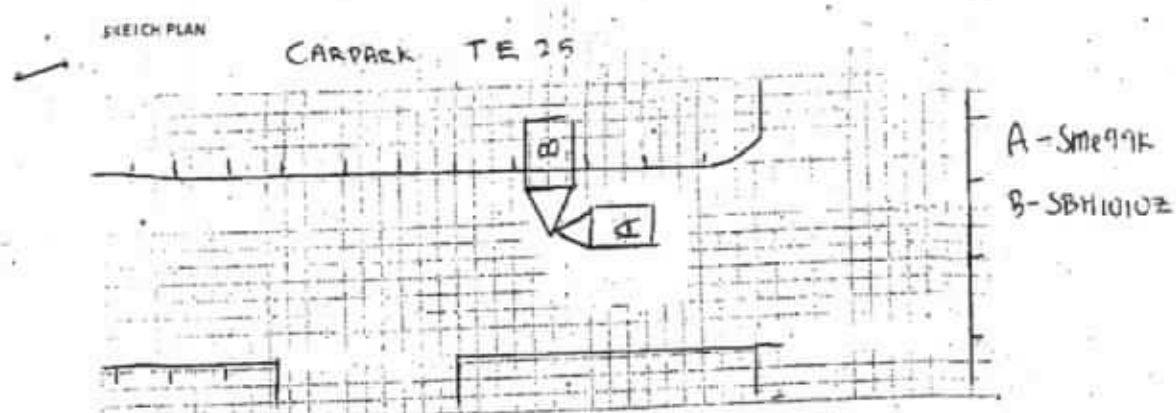
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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) to 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/PPN No.:

Sketch Plan #2 Pg. 1




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

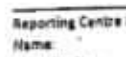
On 28/1/14, around time 1040 AM, I was travelling
at Carpark TE25. Suddenly a white car SBH1010Z
drove out from the carpark lot. I try to avoid but not
in time.
I immediate went down of my car and found out
my car front right was damage.
I also offer to exchange particular with the other
party but he didn't want to.
I feel some pain on my right neck..and
right shoulder.

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/PIR No.:

Sketch Plan #5 Pg. 1



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, 1955 (MALAYSIA)

Certificate Number: S102488929

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle

: SME99K

Chassis Number

: WDD1173422N414038

2. Name of Policyholder

: HO SEIH CHEN

3. Effective Date of Insurance

: 19 Jul 2018

4. Expiry Date of Insurance

: 24 Jul 2019

5. Persons or Classes of Persons entitled to drive

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

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.

6. Limitations as to Use

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)

: S\$600

EXCESS (SECTION 2)

: N/A

WINDSCREEN EXCESS

: S\$100

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

: YES

INSURE WITH COE

: YES

NCD PROTECTION

: NO

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO

PRIMARY DRIVER

: HO SEIH CHEN REBECCA

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: SING INVESTMENTS & FINANCE LTD

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : VV INSURANCE AGENCY PTE. LTD. (00000614878)

Date of Issue : 19 Jul 2018 15:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

SIN MIN CLINIC
221 UPPER THOMSON ROAD
SINGAPORE 574353

TEL 64532266 Receipt No

Name Ho Seih Chen Rebecca 71809

NRIC/ID No S7831388I Date 28/1/19

Description	Amount
-------------	--------

Consultation Fees _____ \$ 25

Medications _____ \$ _____
Anaesthesia 20 5

Investigations/Procedures _____ \$ _____

Practice Costs _____ \$ _____

Prescription Fees _____ \$ _____

Total Amount \$ 30

Authorised Signature [Signature]

Dr Low Hon Kwok DR. LOW HON KWOK
MBBS (SYDNEY) MCR 00425A

SIN MIN CLINIC 221 Upper Thomson Road, Singapore 574353. Tel: 64532266

Medical Certificate *

Y2K No. 48205

Date 28.1.19
Ho Seih Chen Rebecca 57831388I

This is to certify that

is suffering from Wheplash injury to neck

and is unfit for work for Seven days from 28.1.19 to 3.2.19

Fit for light duty for _____ days from _____ to _____

* not valid for absence from work
DR. LOW HON KWOK
MBBS (SYDNEY) MCR 00425A

[Signature]
Dr Low Hon Kwok MBBS (SYDNEY)

SIN MIN CLINIC

221 Upper Thomson Road, Singapore 574353
Dr Low Hon Kwok (MBBS, Sydney)

Tel: 64532266

Fax: 64570470

Email: sinmin221@gmail.com

21 February 2019

VISION LAW LLC

133 New Bridge Road

#18-01/02 Chinatown Point

Singapore 059413

Dear Sirs

Your Ref: AW1-jgv-ins-P48-109468-19(jw)

MEDICAL REPORT OF HÔ SEIH CHEN REBECCA (NRIC NO: S7831388I)

I refer to your letter dated 11 February 2019 and enclose herein the medical report of Madam Ho Seih Chen Rebecca and receipt for payment of medical report fee

Yours faithfully

Leapornum

DR. LOW HON KWOK
MBBS (SYDNEY) MCR 00425A

SIN MIN CLINIC
221 UPPER THOMSON ROAD
SINGAPORE 574353

TEL 64532266

Receipt No

72121Name *VISION LAW LLC*NRIC/ID No *AW1-jgv-ins-P48-109468-19(jw)* Date *21.2.19*

Description	Amount
Consultation Fees	\$
Medications	\$
<i>medical report fee for</i>	
<i>140 SEIH CHEN REBECCA</i>	
<i>NRIC NO: S7831388I</i>	<i>150.00</i>
Investigations/Procedures	\$
Practice Costs	\$
Prescription Fees	\$
Total Amount	\$ <i>150.00</i>

SIN MIN CLINIC

221 Upper Thomson Road, Singapore 574353
Dr Low Hon Kwok (MBBS, Sydney)

Tel: 64532266

Fax: 64570470

Email: sinmin221@gmail.com

21 February 2019

VISION LAW LLC

133 New Bridge Road

#18-01/02 Chinatown Point

Singapore 059413

Dear Sirs

Your Ref: AW1-jgv-ins-P48-109468-19(jw)

MEDICAL REPORT OF HO SEIH CHEN REBECCA (NRIC NO: S78313881)

Madam Ho Seih Chen Rebecca consulted me on 28 January 2019 at 2.00 p.m. She reported she was driving a sedan car along a road inside a car park when the driver of another sedan car in a parking lot on her right hand side did not notice her approaching drove out of the parking lot and caused her car to hit the other car on the passenger side front section on 28 January 2019 at 10.45 a.m.

She complained she felt pain in the back of neck and adjacent right shoulder on moving the head.

On examination there was no visible bruise or swelling in the affected regions, movements of the neck were not restricted, power and sensation and tendon reflexes in both upper limbs were normal. On palpation there were tenderness in the muscles in back of neck and adjacent right shoulder. The complaints and physical examination findings were consistent with diagnosis of whiplash injury to neck caused by the vehicles' collision. The whiplash injury was Grade 1 in the Quebec Classification of Whiplash-Associated Disorders.

She received outpatient treatment, was given Anarex tablets for pain relief and as muscle relaxant, and was given seven days sick leave 28 January to 3 February 2019. She was advised to go to hospital for X ray and treatment if the pain got worse or lasted more than seven days

Yours faithfully



DR. LOW HON KWOK
MBBS (SYDNEY) MCR 00425A

P48-10948

PRECISION MOTORWORKS PTE LTD

Co Reg No.201535749H/ GST Reg No.201535749H

68 Kaki Bukit Ave 6 #01-02 ARK @ KB

Singapore 417896

Telephone: 6385 5564

FINAL REPAIR BILL

DATE: 18 March 2019

TO: HO SEIH CHENG
C/O 68 Kaki Bukit Ave 6
#01-02 KB
Singapore 417896

RE: VEHICLE NO. SME 99 K

REPAIRS COSTS

LUMP SUM REPAIRS
GST 7%

\$17,100.00
\$ 1,197.00

GRAND TOTAL

\$18,297.00
=====

SINGAPORE DOLLARS EIGHTEEN THOUSAND & TWO HUNDRED & NINETY
SEVEN ONLY

PAR Automotive Consultancy

Regn. No: 52986974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131.

Report No: 0141-19-PM

PR-109468

11 March 2019

Ho Seih Cheng
c/o Precision Motorworks
68 Kaki Bukit Ave 6 ARK @ KB #01-02
Singapore 417896

INVOICE No. 0141-19-PM

Vehicle No. SME99K

S/NO.

SERVICES RENDERED

Amount due

1

Being accident vehicle appraisal services, transport,
photographs and re-inspection (work in progress and post
repair inspection).

\$987.00

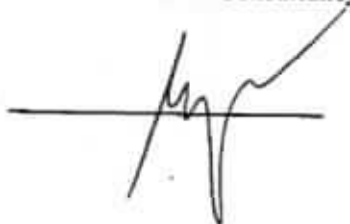
Total amount payable

\$987.00

Kindly cross your cheque in favour of "PAR Automotive Consultancy"

We thank you in anticipation for your prompt payment.

PAR Automotive Consultancy



PAR Automotive Consultancy

Regn. No: S2986974L

Thomson Rd Post Office PO Box 029 Singapore 915701. Tel : 645 31173, Fax : 645 36131.

Report No: 0141-19-PM

11 March 2019

ACCIDENT VEHICLE SURVEY REPORT

Ho Seih Cheng
c/o Precision Motorworks
68 Kaki Bukit Ave 6 ARK @ KB #01-02
Singapore 417896

VEHICLE INFORMATION:

Vehicle Reg No.:	SME99K	Odometer:	29955km
Make & Model:	Mercedes Benz CLA180	Colour:	Black
Chassis number:	WDD1173422N414038	Date of accident:	28/01/2019
Year of Regn.:	25/01/2017	Date inspected:	30/01/2019
Repairer at:	Precision Motorworks 68 Kaki Bukit Ave 6 ARK @ KB #01-02 Singapore 417896	Date inspected (After Repair):	20/02/2019

STATIC CHECKS, where applicable:

Steering :	serviceable
Footbrake :	serviceable
Handbrake :	serviceable
Paintwork :	Good
General condition :	Good

TIRE CONDITION:

	<u>LH / Make</u>	<u>RH / Make</u>	<u>Size</u>
Front:	5mm/Continental	5mm/Continental	225/40R18
Rear:	5mm/Bridgestone	5mm/Bridgestone	225/40R18

POINT OF IMPACT AND DAMAGE, where applicable:

Impact on the front RH portion.

Please see details as described in the Annex for parts and labour.

REMARKS:

We have inspected the above-mentioned vehicle on a "Without Prejudice" basis.

PAR Automotive Consultancy

 Annex A: Page 1
 Report No: 0141-19-PM-SME99K

Parts and Labour Assessment

Report No: 0141-19-PM

Vehicle No: SME99K

Description of part	Qty	Condition as inspected	Repairer's estimate	Our adjustment
Front bumper	1	squashed	1,335.00	1,335.00 /
Front bumper distance radar sensor	1	shorted	1,160.00	X 1,160.00 X
Front bumper distance radar sensor bracket	1	necessary	67.00	X 67.00 X
Front bumper inner side guide RH/LH	1 / 2	necessary	112.00	56 112.00 /
Front bumper lower grille	1	fractured	115.00	X 115.00 X
Front number plate garnish	1	reuse NN	0.00	0.00
Front bumper parking sensor	1 / 4	shorted	752.00	138 752.00 /
Front bumper parking sensor "O" ring	4	necessary	48.00	/ 48.00 /
Front bumper parking sensor holder	4	necessary	180.00	X 180.00 X
Front bumper side retainer RH/LH	1 / 2	necessary	48.00	24 48.00 /
Front bumper sponge	1	deformed	115.00	/ 115.00 /
Front bumper top weatherstrip	1	deformed	129.00	X 129.00 X
Front bumper tow hook cover	1	warped	56.00	X 56.00 X
Front bumper garnish RH	1	deformed	215.00	/ 215.00 /
Front grille	1	fractured	650.00	X 650.00 X
Front grille logo "Mercedes"	1	necessary	135.00	X 135.00 X
Front grille logo emblem bracket	1	necessary	89.00	X 89.00 X
Front grille outer garnish	1	deformed	135.00	X 135.00 X
Front grille outer garnish chrome moulding RH/LH	2	deformed	130.00	X 130.00 X
Front headlamp RH	1	fractured	2,460.00	/ 2,460.00 /
Front headlamp xenon control module RH	1	shorted	286.00	X 286.00 X
Front fender RH	1	buckled	1,400.00	/ 1,400.00 980
Front knuckle arm	1	bent	775.00	X 775.00 Report
Front knuckle arm	1	dislodged	1,160.00	1,160.00 950
Front lower arm	1	bent	525.00	/ 525.00 /
Front shock absorber	1	bent	640.00	X 640.00 /
Front shock absorber top mounting	1	necessary	240.00	X 240.00 /
Front stabiliser link	1	bent	71.00	X 71.00 /
Front steering tie rod end	1	reuse NN	158.00	X 0.00
Front fender inner shield (rear) RH	1	deformed	135.00	/ 135.00 /
Subtotal before discount			13,321.00	13,163.00
Percentage discount 0% and 10%			0.00	1,316.30
Sub-total 1			13,321.00	11,846.70

 6981
 10%: 6282.9

PAR Automotive Consultancy

 Annex A: Page 2
 Report No: 0141-19-PM-SME99K

Front sport rim	1	abraded	1,170.00	1,170.00	850
Front tyres	1	abraded	600.00	600.00	X
Front bumper lower carbon fibre defuser	1	fractured	2,500.00	2,500.00	X
Front bumper lower carbon fibre d-side defuser set	1	fractured	600.00	600.00	380
Subtotal before discount			4,870.00	4,870.00	1230
Percentage discount	0%	and 0%	0.00	0.00	
Sub-total 2			4,870.00	4,870.00	
Parts-total			18,191.00	16,716.70	

LABOUR

1. To straighten and panel beating bonnet, front support panel and front RH frame members. To remove and refit above parts.	1,200.00	750.00
2. To putty, re-spray painting and polish affected areas.	1,600.00	1,000.00
3. To check and rectify wiring system.	80.00	50.00
4. To remove and refit front suspension system.	500.00	350.00
5. To conduct electronic wheel alignment.	200.00	150.00
6. To rust proof affected areas.	120.00	90.00
	<hr/>	
Labour total	3,700.00	2,390.00
Parts & Labour total	21,891.00	19,106.70

Results of inspection of the accident vehicle are as shown above.

We have taken into consideration the age and condition of the vehicle in our recommendation.

Hence, the recommended cost of repairs based on LUMP SUM repairs is :
 and the recommended number of working days for the repairs is :

S17,100.00

7

BJ Loi (I Eng., MIM, AIRTE)
 Automotive Appraiser

8612.9
 20% 6900

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	28/01/2019 16:24
Date Of Accident	28/01/2019 10:45
Exact Location Of Accident	CARPARK LOT 287 @ BLK 145 JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBH1010Z
Insured/Policyholder	
Name Of Registered Owner	NG KIM ENG
NRIC No	S1263252E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97851035
Alternative Phone No	OFFICE-97851035

Vehicle Particulars

Manufacturer	NISSAN
Model	SUNNY
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA030296/1
Cover Note Number	

Driver

Name of Driver	TAN BEOW GER
NRIC No	S1373766E
Date Of Birth	29/01/1959
Occupation	INDOOR
Date Of Driving Pass	30/03/1976
Driving Experience	42 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97851035
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	-
Postcode	-
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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: : WIFE GENDER: : FEMALE

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

refer attached report.

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	SME99K
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**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:

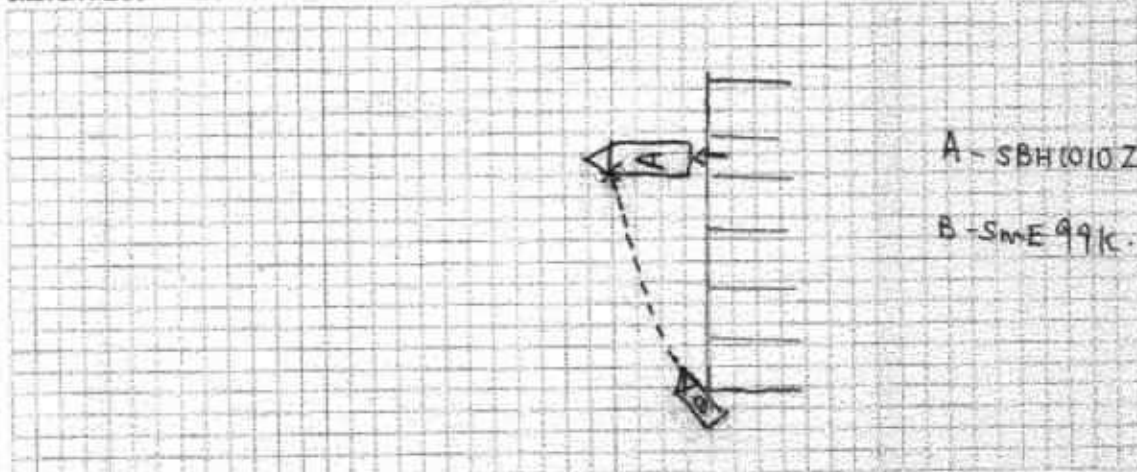
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 purposes 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 be 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

I was driving out from the carpark lot (387) at
 Blk 145 along Jalan Bukit Merah. Suddenly I
 felt a great impact from my car's front
 left portion. Vehicle B had collided onto
 while turning into the carpark lot
 my car's left portion & caused damage.
 Thankfully no injury to both parties.

DECLARATION

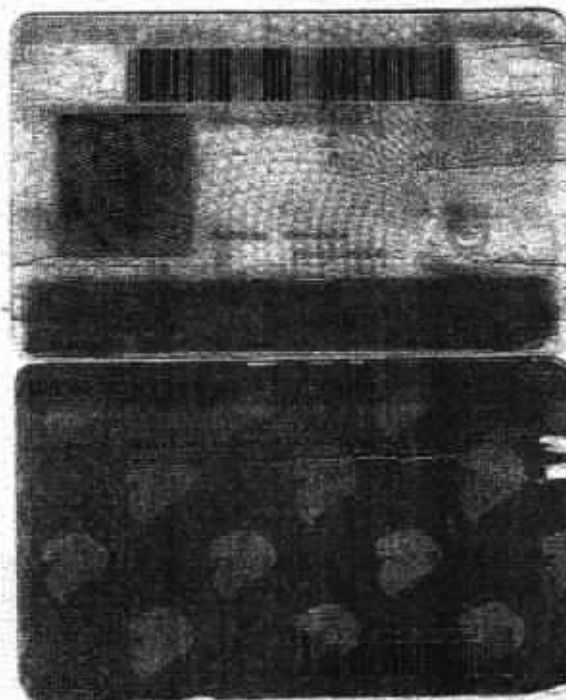
I/We declare the foregoing particulars are true in every respect.

Ngilly
 Policyholder's Signature
 Date & Time:

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

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

SGARHC Sketch Plan Form_V3





redefining insurance

Date: 28/1/13To: Owner of Vehicle Number: SBH 1010ZThe following has been advised to you via your workshop, SBH motor through their staff, his wife

Please tick the applicable box if you had been advice on the content as seen below:

- ☒ You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
- ☒ You had been advised by the workshop on the liability and merits of the case accordingly.
- ☒ You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
- ☒ There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
- ☒ There will be no cancellation/withdrawal of the Own Damage claim once the order of the spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
- ☐ The estimated waiting time for the spare parts to arrive is _____. The estimated arrival time does not include the repair period.
- ☐ You will be driving the vehicle out despite being advised by the workshop mechanic/personnel that the vehicle may not be road worthy.
- ☒ For vehicles below Three (3) years old, your Insurance Company will use only genuine original parts to repair your vehicle.
- For vehicles above Three (3) years old, your Insurance Company will be carrying out repairs using any combination of genuine original parts and/or original equipment manufacturer (OEM) parts.
- ☒ You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
- ☒ For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
- ☐ Others _____

Signed and acknowledge by:

Ngilly
 Name and signature of policyholder/authorised driver

[Signature]
 Name and signature of workshop personnel including company stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Your Ref: 19.26851

Date: 03rd May 2019

Our Ref : CS3/ASM19001959/Gvd3e2-1

M/s AXA Insurance Pte Ltd
C/O: Seah Ong & Partners LLP
36 Robinson Road
#12-03 City House
Singapore 068877
(The Motor Claims Department)

Dear Sir / Madam,

EVALUATION REPORT (PAPER SURVEY) OF ACCIDENT VEHICLE NO: SME 99K
INSURED VEHICLE: SBH 1010Z
ACCIDENT DATE: 28/01/2019

We thank you for your instruction on 14/04/2019.

We acknowledge receipt of the following documents:-

- a) Automobile Inspection Report of SME 99K from M/s Par Automotive Consultancy.
- b) Singapore Accident Statement of Vehicles SME 99K and SBH 1010Z.
- c) Final Repair Bill of SME 99K from M/s Precision Motorworks Pte Ltd.
- d) Colour damaged vehicle photographs of SME 99K.

Pre-Repair Inspection Date : 30/01/2019 at M/s Precision Motorworks Pte Ltd, 68 Kaki Bukit Ave 6 #01-02 ARK @ KB, Singapore 417896.

Based on the documents received from you, we have evaluated the damages of the vehicle and have the following comments:-

1. Information Recorded: -

Registration Number	: SME 99K
Make & Model	: Mercedes Benz CLA180 AMG
Year of Registration	: 2017
Chassis Number	: WDD1173422N414038
Engine Capacity	: 1595 cc
2. We recommend that the repairs of the entire damage require about 7 (Seven) working days to complete.
3. We hereby provide our recommendations on the cost of repair to the damaged vehicle as stated in the following page.



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. SME 99K

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRONT BUMPER	SQUASHED	1,335.00	1,335.00
1	FRONT BUMPER DISTANCE RADAR SENSOR	NOT NECESSARY	1,160.00	-
1	FRONT BUMPER DISTANCE RADAR SENSOR BRACKET	NOT NECESSARY	67.00	-
2	FRONT BUMPER INNER SIDE GUIDE RH / LH	NECESSARY-1PC ONLY	112.00	56.00
1	FRONT BUMPER LOWER GRILLE	NOT NECESSARY	115.00	-
1	FRONT NUMBER PLATE GARNISH (NPA)	NOT NECESSARY	-	-
4	FRONT BUMPER PARKING SENSOR	SHORTED-1PC ONLY	752.00	138.00
4	FRONT BUMPER PARKING SENSOR "O" RING	NECESSARY	48.00	48.00
4	FRONT BUMPER PARKING SENSOR HOLDER	NOT NECESSARY	180.00	-
2	FRONT BUMPER SIDE RETAINER RH / LH	NECESSARY-1PC ONLY	48.00	24.00
1	FRONT BUMPER SPONGE	DEFORMED	115.00	115.00
1	FRONT BUMPER TOP WEATHERSTRIP	NOT NECESSARY	129.00	-
1	FRONT BUMPER TOW HOOK COVER	NOT NECESSARY	56.00	-
1	FRONT BUMPER GARNISH RH	DEFORMED	215.00	215.00
1	FRONT GRILLE	NOT NECESSARY	650.00	-
1	FRONT GRILLE LOGO "MERCEDES"	NOT NECESSARY	135.00	-
1	FRONT GRILLE LOGO EMBLEM BRACKET	NOT NECESSARY	89.00	-
1	FRONT GRILLE OUTER GARNISH	NOT NECESSARY	135.00	-
2	FRONT GRILLE OUTER GARNISH CHROME MOULDING RH / LH	NOT NECESSARY	130.00	-
1	FRONT HEADLAMP RH	FRACTURED	2,460.00	2,460.00
1	FRONT HEADLAMP XENON CONTROL MODULE RH	NOT NECESSARY	286.00	-
1	FRONT FENDER RH	BUCKLED	1,400.00	980.00
1	FRONT KNUCKLE ARM	REPEATED	775.00	-
1	FRONT KNUCKLE ARM	DISLODGE	1,160.00	950.00
1	FRONT LOWER ARM	BENT	525.00	525.00
1	FRONT SHOCK ABSORBER	NOT NECESSARY	640.00	-
1	FRONT SHOCK ABSORBER TOP MOUNTING	NOT NECESSARY	240.00	-
1	FRONT STABILISER LINK	NOT NECESSARY	71.00	-
1	FRONT STEERING TIE ROD END	NOT NECESSARY	158.00	-
1	FRONT FENDER INNER SHIELD (REAR) RH	DEFORMED	135.00	135.00

Report Ref No. CS3/ASM19001959/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

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	LESS 10% DISCOUNT		-	-698.10
			13,321.00	6,282.90
	<u>SPECIAL NETT ITEMS</u>			
1	FRONT SPORT RIM (SN)	ABRADED	1,170.00	850.00
1	FRONT TYRES (SN)	NOT NECESSARY	600.00	-
1	FRONT BUMPER LOWER CABON FIBRE DEFUSER (SN)	NOT NECESSARY	2,500.00	-
1	SET FRONT BUMPER LOWER CABON FIBRE D-SIDE DEFUSER (SN)	FRACTURED	600.00	380.00
			4,870.00	1,230.00
	<u>LABOUR</u>			
	TO STRAIGHTEN AND PANEL BEATING BONNET, FRONT SUPPORT PANE LAND FRONT RH FRAME MEMBERS. TO REMOVE AND REFIT ABOVE PARTS.		1,200.00	400.00
	TO PUTTY, RE-SPRAY PAINTING AND POLISH AFFECTED AREAS.		1,600.00	400.00
	TO CHECK AND RECTIFY WIRING SYSTEM.		80.00	30.00
	TO REMOVE AND REFIT FRONT SUSPENSION SYSTEM.		500.00	150.00
	TO CONDUCT ELECTRONIC WHEEL ALIGNMENT.		200.00	60.00
	TO RUST PROOF AFFECTED AREAS.		120.00	60.00
			3,700.00	1,100.00
	GRAND TOTAL		21,891.00	8,612.90
	RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)			6,900.00

Report Ref No. CS3/ASM19001959/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

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