page		CC 3 11 900 3	103 K	Male / TI	AC:
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Pre-anaga / CC	CONTRACTOR TO THE PARTY OF THE	9742			
Insured Vehicle	No. SPIC	9746	Claim No.		
Name of Insured	4	FU	Policy No.	1	
Insured Tel No.		HP:	Make / Mode		
		12/11/16			
Excess Sec II :5	Manual Company of the	- C	Place of Acci	dent	
Is driver the own	er? (YES / NO	Nature of Accident			
If NO. Driver N	ame / Age :		OI GIA REPO	ORT: YES / NO : TP GI	A REPORT: YES / NO
Driver T	el No. :	(V/L: YES / NO.)	Imured Liabil	ity: 9 Fi	nal 7 Yes / No
SHO TO	rA .	- 12		- 4	
3110 11	1111				
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PRELIMINARY ADVIC	E Date/Time	Sent By:	11-1-1	Post-Repair Photos:	
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FINALIZATION	Date/Time:	Confirm with:		Confirm by:	
Repair Cost:	SS	( days) Reduction:	9.		nad Cast
FINAL SETTLEMENT	Date/Time:	Confirm with		Email Cal	
Final Liability:		greed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Li	0 :
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Medical	SS		Anna strai		al/Reject/Private Settle
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Legal Cost	SS	C1.1.1.C. C2		3) Survey fee:	
Total: FINAL PAYMENT	S\$ Date/Firms	Global Sum SS:		Activity of the second	
		Confirm with:		Email Cal	
Payer I	SS	Name 1:			
Payce 2: (Sinke if N.A.)	55	Name 2:			
Payee 3: (Strike if N.A.)	SS	Name 3:			

ASS. REC. BY:	
Kennerh	SSIGNMENT
From: Date:	
Estimated Cost:	Veh No: S/10 7/71 Yr Regn: 12, 17
OD TP WS ITP RES I OD RES I EVA I INV I MV	-   Taxi / Prime Mover /
To Inspect Vehicle No:	Truck / Traller or
at Workshop m/s Trans Cab	Make: Renault latitude co 18.93
of	Colour M. White I Red AC: Insured / Std / NI / NA
Insured:	Sp.Reading 1492/3 T/Radio: Insured / Std / NI / NA
Policy No.	Eng/No:
Claims No.	CNO: VI-1 ABL 15AUX 283320
Sum Insured: Excess:	Gan, Cond; Good/Fair/Poor/Burnt
(Client's Record)	Steering: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Brake: Ingfder / Jammed / Leaked / Burnt or
THE WASHINGTON ACTOR	Modi: Mil S/Rim / STD A/Rim or
(Policy Condition)	Tyre Size: F: 215/60R16
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The state of the	L/Bal. 8 mm L/Bal. 8 mm
1 2	D.O.A. 18/4/18 D.O.I. 23/4/19
Lum Sum: 7-13/ % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	- 154 Old Rooftop or
Date / Time Action / Instruction	The U/C / Chasals frame / Body Structure affected due to collision.
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1	
28 5 PIP \$ 8.419.18 / 3 days.	
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	The first state of the state of
	LED . \$ 10,096 20 1547.
Onte/Time, File Pass 107 : Prell. Report D	
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Report Format :	: Interview (\$ ) Fixeds 12
Lump Sum / I.B.I: (S	Tech Invs (\$ ) Others 30
	Weekend (\$
	10TAL 430

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 witholding of material facis 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 ladgement 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 uforesaid.

**	CIP	120	POTA		100
AL	CIL	1.0	T STA	I E IV	0.00

Date Of Report

22/04/2019 09:24

Date Of Accident

18/04/2019 23:05

Exact Location Of Accident

FINLAYSON GREEN

Country/State of Loss

SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SHD717A

Insured/Policyholder

Name Of Registered Owner

TRANS-CAB SERVICES PTE LTD

Co Reg No

200303878K

Email Address

CLAIMS@TRANSCAB.COM.SG

Mobile Phone No.

Alternative Phone No.

OFFICE-62866666

Vehicle Particulars

Manufacturer

RENAULT

Model

LATITUDE-2.0 L (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

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

AXA INSURANCE PTE LTD

Type Of Coverage

THIRD PARTY

Fleet Policy

YES

Policy Number

VPX/P1680520

Cover Note Number

Driver

NRIC No

LAU KIM JOO S1547920E 17/03/1962

Date Of Birth Occupation

Name of Driver

OUTDOOR

Date Of Driving Pass

17/06/1982 36 YEARS AND 10 MONTHS

Driving Experience Gender

MALE

Mobile Number

(LOCAL) +65-93229000

Fax Number

Contact Number

EMail Address

NOEMAIL

BLK 613A BEDOK RESERVOIR

#14-1358

471613 Postcode

Was driver an employee of the Insured's Company NO

OTHER - RELIEF

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Address

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

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

ambulance?

NAME:

: UNKNOWN

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TOA PAYOH CENTRAL

Police Station Address

ROAD: 93 TOA PAYOH CENTRAL, POSTCODE: 319194, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT: T/20190420/2041

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FILE TOO BIG

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC924Z

Vehicle Make/Model/Colour

COMFORT TAXI

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF INJURED PERSON 1**

Name

LAU KIM JOO

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHD717A

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

## Sketch Plan Pg. 1

#### SKETCH PLAN

## IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)
  - 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:
  - 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.:

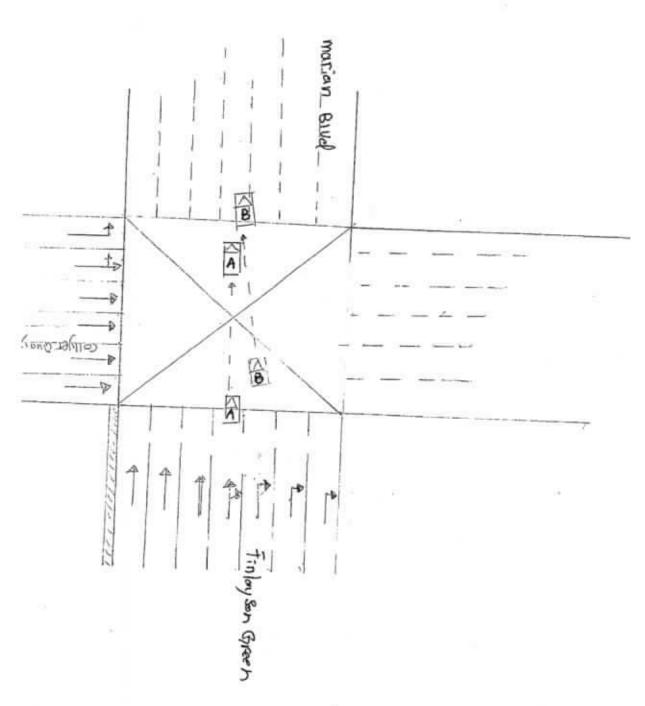
# Sketch Plan #2 Pg. 1

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CLARATION							
CLARATION e declare the foregoing par		n every respec	t.			Grely	

GIARRAC SkatchPlenForm\_V3

2

18.04.2019 23:05 Finlayson Green Toward Marina BIVD A. SHD 717 A B. SHC 924 Z



Firlayson Green Tow Marine BINd

## POLICE REPORT Pg. 1





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519998 2 of 3 Report No. T/20190420/2041

CONTINUATION OF REPORT

Name	SHIP7ITA	10 mm 17.	L 1180	ID No		S1547920E
Related Vehicle	SHO717A (Car) 51 Ang Mo Nio Nio Ave 9			Conta	ct No.	93229000
Hospital/Clinic	NIL		Class Drivin Licens Expir	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc			charge	NIL	
No. of Days gran	ted Medical Leave	04	Degree o	finjury	NIL	

#### **Brief Details**

On 18.04.2019 at about 2305hrs I was driving my vehicle bearing registration of SHD717A along Finlayson Green towards Marina Boulevard at Lane 4. On Lane 1 to 3 only for right turn. While I was driving my said vehicle, I saw one vehicle bearing registration of SHC924Z was driving at Lane 3 which supposed to turn only right.

While I was driving, out of sudden the said vehicle changes to my lane and I did honk the said vehicle. The said vehicle sudden emergency break and stop his said vehicle and I hit onto his right side of his said vehicle.

I then make a check on my said vehicle and I discovered that my said vehicle right bumper and driver door already dented and seriously damaged. The driver then took a picture of our vehicle and went off. No exchange particular. Neither traffic police nor ambulance at scene. There is one passenger in my said vehicle. No one is injured during the incident.

I proceed to clinic to make a check and I was given 4 days of MC dated from 20.04.2019 to 23.04.2019.

## POLICE REPORT Pg. 1





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 CONTINUATION OF REPORT Tel No: 1800-2519999

3 of 3 Report No. T/20190420/2041

## 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: E / Staff Sgt NUR FHADILAH BINTE MOHD KHALID	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2019 11:02
Officer In Charge Of Case:	Classification Of Case:
Staff Sgt WONG SIEU LINE SINGAPOTT POLICE TO P	SN 168
Authentication Stamp	\$1 <sup>1</sup>

# POLICE REPORT Pg. 1





Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

T/20190420/2041
112010042012041

1 of 3 Report No. T/20190420/2041

REPURI	OF A TRAFFI	ACCIDENT			
Date/Time Report Made: 20/04/2019 11:02			Vide Report No.:	Station Diary No.: 54	
Informa	nt's Partic	ulars 1999	7年1月24日中国中国1000年1000年1000年1000年1000年1000年1000年1	是完全XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
Name o	f Informant: M JOO		Address: APT BLK 613A BEDOK RESI SINGAPORE 471613	ERVOIR ROAD #14-1358	
ID Type / ID No.: NRIC NO / S1547920E			Contact No.: Home/Office: Mobile: 93229000		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Age: Date of Birth: Male 57 17/03/1962			Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation:			Driving Licence Information:	Date of Eveing	

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/04/2019 23:05	Type of Location: Straight Road
FINLAYSON Along Finlays	Traveling Toward Ro GREEN on Green towards Ma	rina Boulevard		D
Weather, Clear		Road Surface: Dry	2	Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic
One Way	Type of Collision: Between Moving Vehicles - Head To Side			

	Total Miles					No	
Ang M	o North NPE o Kio Ave 9 Details of V	ehicle Involved	Walter Charles	A STREET AS	Variation Continues	A STATE	#30 something
1: 484 9		Type is 10 in a	Make	Model	Colon	Condition.	No of Passenger
1	SHC717A	Car				Seriously Damaged	1
k	SHC924Z	Car	*			Slightly Damaged	0

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

## Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111 Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

**SHD 717A** 

Not Norhaster Personery B4 paint

AAD1904-200

**SHD 717A** 

VF1ABL15AUC283320

RENAULT

LATITUDE

18.4.2019

Ш

29/12/2017

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident:

Third Party Insurer:

Date of Registration:

PART

LIST

1	BUMPER COVER FRT	\$	R, 1,259.42 —
1	BUMPER SPOILER FRT	\$	Sa 181.75 X
1	BUMPER ABSORBER FRT	\$	CM 394.68 7
1	BUMPER RETAINER FRT RH	\$	Dis 150.77 -
1	BUMPER SUPPORT FRT	\$	123.88 X
1	BUMPER UNDERTRAY FRT	\$	Sm 472.83 ⊀
1	BUMPER GRILLE LOWER FRT	\$	1m 266.80 ⊀
1	BUMPER FOG LAMP GRILLE RH	\$	A11 207.21
1	BUMPER BEAM FRT	\$	By 914.08 7
1	HEADLAMP RH	\$	"Jem 1,184.43
1	HEADLAMP PANEL FRT RH	\$	N 152.15 X
1	FENDER PANEL FRT RH	\$	₹ 783.83 <u></u>
1	WHEELARCH FRT RH	\$	SL 278.84 X
1	FENDER BRACKET LOWER RH	5	√L 15.79 ×
1	FENDER INSULATOR RH	5	√∽ 130.84 ×
1	WIPER RESERVOIR	\$	5 348.25 ⊀
1	WIPER RESERVOIR NECK	\$	55 136.11 X
1	WIPER RESERVOIR MOTOR	\$	Sh 270.06 X
1	RADIATOR GRILLE	5	CM 1,707.78 -
1	RADIATOR GRILLE BADGE 'RENAULT'	\$	1 225.36 —
1	RADIATOR GRILLE FRAME	5	CM Sa 1,353.75 x
1	FRAME FULL SUPPORT PANEL	\$	SL 615.90 X
1	FRAME FULL SUPPORT BRACKET	\$	89.79       ✓

TOTAL	\$ 11,264.31
10%	\$ 1,126.43
TOTAL	\$ 10,137.88

# Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111 Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

**SHD 717A** 

# Specical Nett

1SET	BUMPER CLIP FRT	\$ Ma 66.00 -
1	BUMPER BRACKET CLIP FRT RH	\$ 12.00 X
1	BUMPER SUPPORT CLIP FRT RH	\$ nn 10.50 X
1SET	BUMPER GRILLE LOWER CLIP	\$ nn 69.00 X
		\$ 157.50
	TOTAL PARTS	\$ 10,295.38
	LABOUR	
	Panel beating, knocking and straightening the	
	necessary portion, remove and renewal of parts,	مج
	adjust and realign the same	\$ 3,000.00
	Putty and spray painting of the affected portion.	\$ 3,000.00 kear
	To rust-proofing of the affected areas.	\$ 170.00 301
	To remove and refit interior fittings, trimings,	
	garnish, fittings and other, to enable repair.	\$ 12 380.00 €
	To check steering geometry and computer wheel	
	alignment	\$ 12 220.00 X
	To transfer of tire, rim and on wheel balancing.	\$ ~~ 170.00 X
	To Check Electrical Lighting Concerned.	\$ 170.00 201
	To transfer of front fender fittings, attachment	Partit
	and perform water seepage test.	\$ 20.00 X
	To vacuum, replace, refix and recharge air	GIGGS Separated that
	condenser	\$ ₹ 380.00 X
	To replace, refix and top up coolant for radiator	\$ ~~ 170.00 X

# Trans-cab Auto Services Pte Ltd

AAD1904-200

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666

Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

**SHD 717A** 

To vacuum, replace, refix and recharge Air Intercooler

5

N~ 170.00 X

TOTAL \$

8,210.00

Over All Total \$

18,505.38

PART-BY-PART (REPAIR DAY)

10 DAYS

Zday,

LKK Auto Consultants hance notify the Fooperur of the following:

- 35 Service to the renowing:
- 4 To display formed participating imprays
- A Part Local and a district to continuation
- . This bory survey is on a "Minost Projettes" basis.
- · His might excitinition in the abovest
- Supplementary company must be resurrelyed and
  is subject to first approve from froutness Company

Acknowledged by Repairer Signature:

## > Back to OneMotoring

## Enquire PARE/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	387BK
Vehicle Details	
Vehicle No.:	SHD717A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	22 Apr 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	M9R8839C003265
Chassis No.:	VF1ABL15AUC283320
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	29 Dec 2017
First Registration Date:	29 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$19,998.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Dec 2025
PARF Rebate Amount:	\$14,998.00
Intended COE Rebate Details	
COE Expiry Date:	28 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	В
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$27,327.00
Total Rebate Amount: Message	\$42,325.00
And the state of t	

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 22 Apr 2019

OK

# Claim Audit

-	AUDIT TRAIL					
						[A
	24 Apr 2019 14:16	Clm Dtl Modified				Sh Pe
2	24 Apr 2019 14:16	Clm Veh Model Changed	(204383) RENAULT LATITUDE 2.0 L (A).			
3	24 Apr 2019 14:16	Clm Created	Reg No: SHD717A. A Insurance Pte Ltd (Hi uto Services Pte Ltd	cct Date: 2019/04/18. Claim Type: TP. Insure 2), TP Insurer: AXA Insurance Pte Ltd (HQ). ( Ang Mo Kio)	er: India International Workshop: Trans-cab A	Pe
	24 Apr 2019 14:16	Adj Co Assigned	LKK Auto Consultants Pte Ltd (HQ):			La Sh Pe
	24 Apr 2019 14:16	Adj Next Rpt Changed				La Sh Pe
	24 Apr 2019 14:16	Adj Mandate Set	Approved: 0.00.Reinsp: Adj decides.			La Sh Pe
	24 Apr 2019 14:16	Label Added	(30653):Direct Settle	ement,		La Sh Pe
	24 Apr 2019 14:16	Adj Adjuster Assigned	[None] -> KENNETH	KONG		La Sh Pt
	25 Apr 2019 08:47	Cim Cancelled	Cancelled: SHC924Z	s not insured under us. SHC924Z is insured t	by MS FCI	Gab We
	Date Fr	om 4	▶ Date To	◀ 📑 🕨 Audit Type None	▼ Go	
CI	TIVITY					
1	record					
e	rimen Billing	for this case - Transaction	on History			
	billing items					

## Shu Pei (LKKAuto)

From:

Shu Pei (LKKAuto)

Sent:

Monday, 27 May 2019 9:38 AM

To:

Ng Wai Yin

Subject:

RE: Your Ref. AAD1904-200 (SHD 717A) \*Our Ref. CC3/TP19007203/Kb3 [ACCIDENT

INVOLVING SHD 717A & SHC 924Z ON 18/04/2019]

Dear Wai Yin,

Kindly advise payment status.

Thank you

Best Regards,

Shu Peil Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupei@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Shu Pei (LKKAuto)

Sent: Monday, 29 April 2019 11:25 AM

To: Ng Wai Yin <waiyin.ng@transcab.com.sg>

Cc: Admin A <admin-a@lkkauto.com>

Subject: RE: Your Ref: AAD1904-200 (SHD 717A) \*Our Ref: CC3/TP19007203/Kb3 [ACCIDENT INVOLVING SHD 717A &

SHC 924Z ON 18/04/2019]

Dear Wai Yin,

Please prepare payment.

We will prepare our survey report and send to you soonest.

Thank you

Best Regards,

Shu Pei Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupei@liduluto.com | fax: 6741-4108

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

From: Ng Wai Yin <waiyin.ng@transcab.com.sg>

Sent: Friday, 26 April 2019 5:02 PM

To: Shu Pei (LKKAuto) <shupei@lkkauto.com>

Cc: Admin A <admin-a@lkkauto.com>; SUR <sur@lkkauto.com>

Subject: FW: Your Ref: AAD1904-200 (SHD 717A) \*Our Ref: CC3/TP19007203/Kb3 [ACCIDENT INVOLVING SHD 717A &

SHC 924Z ON 18/04/2019]

#### \*WITHOUT PREJUDICE

Dear Shu Pei

Please let us have a copy of your survey invoice.

Thank You Best Regards, Ng Woi Yin Busine Department 751 6603 1255 Ext 308

\*\*\* Please be reminded that all claims correspondence to be send to claims@transcab.com.sg



## TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63, Singapore 569111 Main Line: (65) 6287 6666 Fax Line: (65) 6287 7764 Website: www.transcab.com.sg

The integral of the country and security of this message contains and on the Internet.

From: Shu Pei (LKKAuto) [mailto:shupei@lkkauto.com]

Sent: Thursday, 25 April, 2019 11:05 AM

To: jasminetan@transcab.com.sg; 'Ng Wai Yin' <waiyin.ng@transcab.com.sg>; claims@transcab.com.sg

Cc: Admin A <admin-a@lkkauto.com>

Subject: Your Ref: AAD1904-200 (SHD 717A) \*Our Ref: CC3/TP19007203/Kb3 [ACCIDENT INVOLVING SHD 717A & SHC

924Z ON 18/04/2019]

Your Ref: AAD1904-200 (SHD 717A) Our Ref: CC3/TP19007203/Kb3

## ACCIDENT INVOLVING SHD 717A & SHC 924Z ON 18/04/2019

We refer to the above matter.

Please be informed that SHC 924Z is insured with FCI instead of III.

Kindly confirm if you are agreeable to purchase our independent survey report.

Appreciate an early reply.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: <u>shupei@likkauto.com</u> | fax: 6741-4108 6lk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



This email has been checked for viruses by AVG antivirus software. www.avg.com



5b.

ESTIMATED NORMAL PERIOD FOR REPAIR:

# 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

TDA	NC CAR ALITO CO	ERVICES PTE LTD	Ref : CC3/TP190072	
IKA	NS-CAB AUTO SE	EKVICES PIE LID	Ref : CC3/1P190072	203/ND3q2
10.	2 ANG MO KIO ST	REET 63SINGAPORE 5691	11 Date: 29-05-2019	
			Code: TP378	3,000,000,000,000,000,000,000,000,000,0
١.		Policy Particular	s :- THIRD PARTY CLA	IM
	Insured Veh.		Veh. Inspected	SHD 717A
	Policy No.		Coverage (\$)	0.00
	Claim No.		Excess (\$)	0.00
	Assign From		Assign Date	23/04/2019
2.		Vehicle Par	ticulars & Condition	V = 12/11 1 = 2/11
	Make & Model	RENAULT LATITUDE (A)	c.c	1995
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	VF1ABL15AUC283320	Colour	METALLIC WHITE / RED
	Odometer	149213	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
3.		Cond	itions of Tyres	THE RESERVE
		Size	Make	Balance
	R/H Front Tyre	215/60 R16	GITI	8 mm
	L/H Front Tyre	215/60 R16	GITI	8 mm
	R/H Rear Tyre	215/60 R16	GITI	8 mm
	L/H Rear Tyre	215/60 R16	GITI	8 mm
١.		Descrip	tion of Damages	The Editor Hills
	THE VEHICLE SU	STAINED DAMAGES AT THE F	RONT O/S PORTION.	
	DAMAGES SEE D	ETAILS.		
5.		Gene	ral Information	
	Accident Date	18/04/2019	Inspection Date	23/04/2019
	Survey held at	TRANS-CAB AUTO SERVICE	S PTE LTD	
		NO.2 ANG MO KIO ST 63 SINGAPORE 569111		

Estimate Days of Repair

3 Working Days



# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 2

# ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 717A

ty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BUMPER COVER FRT	BENT	1,259.42	1,259.42
1	BUMPER SPOILER FRT	SERVICEABLE	181.75	_ 0
1	BUMPER ABSORBER FRT	CRACKED	394.68	394.68
1	BUMPER RETAINER FRT RH	DISTORTED	150.77	150.77
1	BUMPER SUPPORT FRT	SERVICEABLE	123.88	(1
1	BUMPER UNDERTRAY FRT	SERVICEABLE	472.83	
1	BUMPER GRILLE LOWER FRT	SERVICEABLE	266.80	
1	BUMPER FOG LAMP GRILLE RH	MISSING	207.21	207.21
1	BUMPER BEAM FRT	BENT	914.08	914.08
1	HEADLAMP RH	MTG CRACKED	1,184.43	1,184.43
1	HEADLAMP PANEL FRT RH	TO REPAIR SEE LABOUR	152.15	
1	FENDER PANEL FRT RH	BENT	783.83	783.83
1	WHEELARCH FRT RH	SERVICEABLE	278.84	
1	FENDER BRACKET LOWER RH	SERVICEABLE	15.79	- 35
1	FENDER INSULATOR RH	SERVICEABLE	130.84	12
1	WIPER RESERVOIR	SERVICEABLE	348.25	8
1	WIPER RESERVOIR NECK	SERVICEABLE	136.11	
1	WIPER RESERVOIR MOTOR	SERVICEABLE	270.06	
1	RADIATOR GRILLE	CRACKED	1,707.78	1,707.78
1	RADIATOR GRILLE BADGE "RENAULT"	NECESSARY	225.36	225.36
1	RADIATOR GRILLE FRAME	CRACKED	1,353.75	1,353.75
1	FRAME FULL SUPPORT PANEL	SERVICEABLE	615.90	
1	FRAME FULL SUPPORT BRACKET	TO REPAIR SEE LABOUR	89.79	13
	LESS 10% DISCOUNT		-1,126.43	-818.13
			10,137.87	7,363.18
	SPECIAL NETT ITEMS			
1	SET BUMPER CLIP FRT (SN)	NECESSARY	66.00	66.00
1	BUMPER BRACKET CLIP FRT RH (SN)	NOT NECESSARY	12.00	1
	BUMPER SUPPORT CLIP FRT RH (SN)	NOT NECESSARY	10.50	
	SET BUMPER GRILLE LOWER CLIP (SN)	NOT NECESSARY	69.00	
	The second secon		157.50	66.00

Report Ref No. CC3/TP19007203/Kb3q2



# LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:2 of 2

Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
LABOUR			
PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF HEADLAMP PANEL FRT RH AND FRAME FULL SUPPORT BRACKET.		3,000.00	500.00
PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		3,000.00	440.00
TO RUST-PROOFING OF THE AFFECTED AREAS.		170.00	30.00
TO REMOVE AND REFIT INTERIOR FITTINGS,TRIMINGS,GARNISH, FITTINGS AND OTHER,TO ENABLE REPAIR.	NOT NECESSARY	380.00	8
TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	8
TO TRANSFER OF TIRE,RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	9
TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
TO TRANSFER OF FRONT FENDER FITTINGS,ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	
TO VACUUM,REPLACE,REFIX AND RECHARGE AIR CONDENSER.	NOT NECESSARY	380.00	9
TO REPLACE, REFIX AND TOP UP COOLANT FOR RADIATOR.	NOT NECESSARY	170.00	35
TO VACUUM,REPLACE,REFIX AND RECHARGE AIR INTERCOOLER.	NOT NECESSARY	170.00	
		8,210.00	990.00
GRAND TOTAL		18,505.37	8,419.18
RECOMMENDED COST OF REPAIRS			8,419.18
	LABOUR  PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF HEADLAMP PANEL FRT RH AND FRAME FULL SUPPORT BRACKET.  PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.  TO RUST-PROOFING OF THE AFFECTED AREAS.  TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.  TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.  TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.  TO CHECK ELECTRICAL LIGHTING CONCERNED.  TO TRANSFER OF FRONT FENDER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR CONDENSER.  TO REPLACE, REFIX AND TOP UP COOLANT FOR RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR INTERCOOLER.	LABOUR  PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF HEADLAMP PANEL FRT RH AND FRAME FULL SUPPORT BRACKET.  PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.  TO RUST-PROOFING OF THE AFFECTED AREAS.  TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.  TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.  TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.  TO CHECK ELECTRICAL LIGHTING CONCERNED.  TO TRANSFER OF FRONT FENDER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR CONDENSER.  TO REPLACE, REFIX AND TOP UP COOLANT FOR RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR INCT NECESSARY  NOT NECESSARY	LABOUR  PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME.INCLUSIVE OF THE REPAIR OF HEADLAMP PANEL FRT RH AND FRAME FULL SUPPORT BRACKET.  PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.  TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.  TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.  TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.  TO CHECK ELECTRICAL LIGHTING CONCERNED.  TO CHECK ELECTRICAL LIGHTING CONCERNED.  TO TRANSFER OF FRONT FENDER STEEPAGE TEST.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 380.00 FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO REPLACE, REFIX AND TOP UP COOLANT FOR RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  REPLACE REFIX AND TOP UP COOLANT FOR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO VACUUM, REPLACE, REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO SAME THE REPLACE REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO SAME THE REPLACE REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.  TO SAME THE REPLACE REFIX AND RECHARGE AIR NOT NECESSARY 170.00 RADIATOR.

Report Ref No. CC3/TP19007203/Kb3q2

KONG SENG CHEONG

Licensed Appraiser