

22/03/2019

ASS. REC. BY:

REF: CS/SMD19007220/Ksd312

Special Instruction:

Supervisor: Kenneth

ASSIGNMENT (Office)

From (Person): Ruth Chua Get Tiong of SMO Date/Time: 24.4.19 11.28 a.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLM 3565G Insured: GW 4352D

at Workshop m/s Comfortdelgro Engineering Tel: 63837362

of 2015 Braddell

Policy No: D18MTPCVE 002264 Claim No: CMTD1907021

Sum Insured: Excess:

Make of Veh: D.O.A. 10.02.19
(Client's Record)

CA / REV / REP. / REV 24 HRS

Date/Time: 24.4.19 11.58 a.m Person Contacted: Andrew Vehicle: IN/OUT

H.O.D. Endorsement:

| Date/Time | Action/Instruction (✓) Estimate |
|-----------|---------------------------------|
| | SLM 3565G - X |
| | GW 4352D - X |
| 25/4/19 | Send preli revised via merimen |
| | Call Log 811506 |

merimen

2446.60 / 5 days

ASS. REC. BY:

REF: SMO/

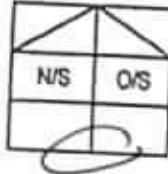
Kenneth

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s Car Pal
 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 Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 02 days Res.: Yes or No
 Lum Sum: 1.3.1 % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Date / Time Action / Instruction

1 File pass to

Kenneth Confirmed LIS \$ 1,150/- @ 2 days with Ade Andrews (\$ 1,296.60 Red - 53%)

RECEIVED 23 DEC 2019

Veh No: SLM 3565G Yr Regn: 03, 17
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or Wagon
 Make: Audi A4 c.c. 1395

Colour: M. D. Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 52340 T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: WAU 22ZF47HA123910

Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or

Mod: NI / S/Rim / STD A/Rim or
 Tyre Size: F: 205/80R16
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Continental

Front R/Bal. 8 mm Rear R/Bal. 8 mm
 L/Bal. 8 mm L/Bal. 8 mm
 D.O.A. 10/2/19 D.O.I. 24/4/19

Survey held at _____
 Des. of Damages: Frt Rear / O/S / N/S / UIC / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

23/12/19

: Prell. Report
 : Final Report

Date/Time, File Return to?

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

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

Survey Fee:

Transportation:

S - RS. \$

Flights

Others

TOTAL

| |
|-----|
| 250 |
| 11 |
| 261 |

Report Format :

Lump Sum / I.B.I. (\$) 1,150/- LIS

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: Ruth Chua Gek Tiang **Date:** 25 Apr 2019

Preliminary Advice

| | | | |
|--------------------|-------------------------------------|-------------------------|--------------|
| Insured Vehicle No | : GW4352D | Accident Date | : 10/02/2019 |
| TP Vehicle No | : SLM3565G | Assignment Date | : 24/04/2019 |
| Make | : AUDI A4 | Est. Duration of Repair | : 2 |
| Date of Inspection | : 24/4/2019 | | |
| Inspection At | : COMFORTDELGRO ENGINEERING PTE LTD | | |

Point of Impact / General Description of Damages

The vehicle sustained impact / damages rear portion and parts claimed are consistent to the accident.

| | | |
|-----------------------------|-------------|-----------------|
| Repairer's Estimate (Gross) | :S\$ | 2,446.60 |
| Revised Amount | :S\$ | 1,459.00 |
| Check Items (Estimated) | :S\$ | 150.80 |
| Total | :S\$ | 1,609.80 |

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.

Other comments : The above survey was conducted on a 'Without Prejudice' basis.

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

THE REPAIRER HAS NOT SUBMITTED THEIR ESTIMATES

If you wish to work on the report, contact the repairer below to submit it.
You can authorize repairer submission after **5** days.

0 days have passed since assignment.
You can authorize the submission of the repairer's estimates in **120 HOURS**.

CLAIM SUBFOLDER TRACKING

| Case | Notified | Est Submitted | Adj Assigned | Adj Rpt | Adj Submitted | Ins Auth'ed | Status |
|------|-------------|---------------|--------------------------------|---------|---------------|-------------|--------------------------------------|
| Main | 24 Apr 2019 | | 24 Apr 2019 11:28 Assign | | | | New Assignment Cancel Case |

| | | | | |
|------|-----------|---------------|-----------|----------|
| Main | Reference | Claim Details | Documents | Show All |
|------|-----------|---------------|-----------|----------|

| CLAIM SUBFOLDER DETAILS | | | | | | | | | |
|--|--|------------------------|------------------------------------|---------|---------|-------------|--------------|------------|-------|
| Insured: | AIN'S FORKLIFT TRADING ENGINEERING, Co. Reg. No.: 52959123E | | | | | | | | |
| Main Claimant: | COMFORTDELGRO RENT-A-CAR, Co. Reg. No.: 198105775H | | | | | | | | |
| Vehicle Reg. No.: | SLM3565G | Date of Loss: | 10/02/2019 06:00 - :59 | | | | | | |
| Claim Type: | TP / CMTD1902021 | Policy/Cover Note No.: | D18MTPCVE002264 (Third Party Only) | | | | | | |
| Vehicle Reg. No. (Insured): | GW4352D | Policy No. (Claimant): | | | | | | | |
| | | Excess: | | | | | | | |
| Repairer: | ComfortDelGro Engineering Pte Ltd (Braddell) 205 Braddell Road, 579701 Toa Payoh - Tel: 63837168 /63837118 | | | | | | | | |
| Handling Insurer: | Sompo Insurance Singapore Pte. Ltd. (HQ) - Tel: 6461 6555 ... [Handled by Ruth Chua Gek Tiang - 6329 5153] | | | | | | | | |
| Adjuster: | LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Final Rpt due 06/05/2019] | | | | | | | | |
| Adj Asp. Remarks: | WS: Off: 6383 7656 (Ngo) / Off: 6383 8115 (William) / Off: 6383 7362 (Andrew) -PLEASE BE INFORMED THAT OUR INSURED HAS NOT REPORTED THE ACCIDENT | | | | | | | | |
| 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. | | | | | | | | | |

Shirley Hiew (LKK Auto)

From: CDGE Braddell Private Cars Crash Repair Operation
<braddell_operation@sparkcarcare.com>
Sent: Monday, 23 December 2019 10:12 am
To: Shirley Hiew (LKK Auto)
Cc: Cecilia Lee Peng Geok; Denis Teo Chin Chye; Kristy Tay Siew Hwa
Subject: Re: SLM3565G - Aft Repair Photos
Attachments: ESTIMATE MARKED.pdf

Without Prejudice

Dear Shirley

We confirm the offer amount.

Aside to Cecelia

FYI.

AG
Best Regards
External Business | ComfortDelGro Engineering Pte Ltd
Off: 6383 7656 (Ngo - Supervisor) / Off: 6383 8115 (William) / Off: 6383 7362 (Andrew)
Fax: 6281 5767
www.SPARKcarcare.com

From: Shirley Hiew (LKK Auto) <ShirleyHiew@lkkauto.com>
Sent: Friday, 20 December 2019 3:41 PM
To: CDGE Braddell Private Cars Crash Repair Operation <braddell_operation@sparkcarcare.com>
Subject: RE: SLM3565G - Aft Repair Photos

Dear Andrew,

Please confirm L/S \$ 1,150.00/2 days.

"Best Wishes for Merry Christmas & Happy New Year 2020"

Thank you.

Best Regards,

Shirley Hiew | Case Handler

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 | 12/02/2019 03:46 |
| Date Of Accident | 10/02/2019 08:00 |
| Exact Location Of Accident | JUNCTION AT W COAST HWY AND ALEXANDRA RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------------|
| Vehicle Registration Number | SLM3565G |
| Insured/Policyholder | |
| Name Of Registered Owner | COMFORTDELGRO RENT-A-CAR |
| Co Reg No | 198105775H |
| Email Address | DANNYNG@CDGRENTACAR.COM.SG |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-68820888 |

Vehicle Particulars

| | |
|--|----------------------------|
| Manufacturer | AUDI |
| Model | A4 AVANT 1.4 TFSI S TRONIC |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE |
| 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 | INDIA INTERNATIONAL INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | YES |
| Policy Number | M460802 |
| Cover Note Number | |

Driver

| | |
|----------------------|-------------------------|
| Name of Driver | NORRIS MARK JAMES |
| NRIC No | F2467112R |
| Date Of Birth | 02/12/1961 |
| Occupation | INDOOR |
| Date Of Driving Pass | 16/01/2015 |
| Driving Experience | 4 YEARS AND 0 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-92236274 |
| Fax Number | |
| Contact Number | |
| EMail Address | MARK.NORRIS@NORDSON.COM |

| | |
|---|---------------|
| Address | NIL |
| Postcode | |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| 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 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 | 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: : PASSENGER 1 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

I WAS DRIVING ALONG W COAST HWY TOWARDS TUAS . WHEN I STOP IN FRONT TRAFFIC LIGHT FOR WAITING . SUDDENLY VEHICLE B COLLIDED ONTO REAR OF MY VEHICLE . NO INJURIES INVOLVED.

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 | GW4352D |
| Vehicle Make/Model/Colour | TOYOTA DYNA 150 D |
| Details Of Properties | NA |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | AZA |
| NRIC/Passport Number | |
| Contact Number | 92373129 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |



No. Of Passenger (Including Driver)

Sketch Plan

IMPORTANT NOTICE

1. This Form must be completed by the Policyholder and/or the Authorized Driver.
2. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
3. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
4. Any false reporting may be referred to the Police for investigation.
5. 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 application by interested parties.
6. 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.
7. Consent under the Personal Data Protection Act (PDPA)
 - (a) I understand, acknowledge, agree and consent that
 - (i) 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 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 making 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/are 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 based outside of Singapore, for one or more of the above Purposes.

[Handwritten Signature]

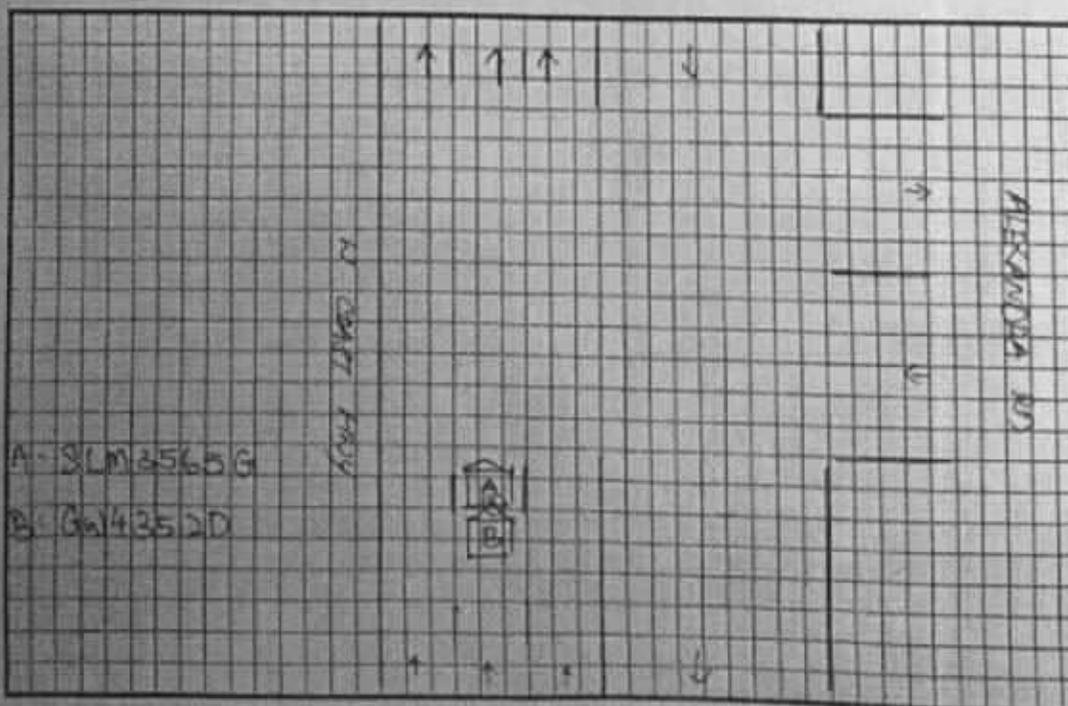
VERIFIED BY AJAX MARS
REPORTING OFFICER
JUN KEAT

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Common Statement

ACCIDENT STATEMENT (2000 characters)

I WAS DRIVING ALONG W COAST HWY TOWARDS TUAS . WHEN I STOP IN FRONT TRAFFIC LIGHT FOR WAITING . SUDDENLY VEHICLE B COLLIDED ONTO REAR OF MY VEHICLE . NO INJURIES INVOLVED .

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER
WONG JUN KEAT

MARS Officer



Regional Owner or Driver's Signature

Job Complete Date/Time:

11 February 2019 at 3:40 PM

Date/Time:

11 February 2019 at 3:40 PM



205 Braddell Road S(579701)

ACCIDENT REPAIR ESTIMATE

Our Ref:

Type of Claim : TP

Vehicle No. : SLM3565G

Make & Model : AUDI A4 AVANT 1.4 TFSI

Year of Manufacture : 2017

Chassis No. : WAUZZZF47HA123910

Ins Company : III / SOMPO

Engine No. : _____

Excess : _____

Policy No. : _____

Date of Accident : 10/02/2019

Time of Accident : _____

Suggested Days of Repair : _____

In-house Vehicle Assessor : _____

Repair Estimate

Case Owner : Andrew

Signature : _____

Parts (a) Cost / List Price Items \$ -

Plus/Less 30% \$ -

Total of Cost / List \$ -

(b) Nett Price Items \$ -

Less \$ -

Total of Nett Item \$ -

(c) Special Nett Items \$ -

Total Parts Cost (Appendix A) \$ -

Labour (Appendix B) \$ 1,800.00

Total Repair Cost \$ 1,800.00

Contact No
Frt Counter Operation
 6383 7466 - Patrick Tia
 6383 7730 - Brenda Ng
 6383 7890 - Rohani
braddell_cr@sparkcarcare.com

Workshop Operation
 63837656 - Ngo Toh Wee
63837362 - Andrew Goh
 63838115 - William Wang

braddell_operation@sparkcarcare.com

*NOT Authorized
 T.B.1
 Resurvey B4 paint*

The above total will be subjected to 7% G.S.T.

Name of Surveyor : Kenneth

Company : CKK

Survey conducted on : 23/4/19 at _____

Remarks By Surveyor

(a) The repair of this vehicle is not authorized / is not authorized until further notice.

(b) Recommended Days of Repair : 02 day(s)

(c) Resurvey : Required / Not Required

(d) Excess : \$ _____

(e) Signature of surveyor : Le Date: 23/4/19

Spark Car Care

ComfortDelGro Engineering Pte Ltd

205 Braddell Road S (579701)

Tel: 63837168 / 63837466 Fax:62844284,62815767

Spare Parts

Vehicle No : SLM3565G Case Owner : Andrew

Make & Model : AUDI A4 AVANT 1.4 TFSI Year Manufacture : 2017

Chassis No : WAUZZZF47HA123910 Engine No : 0

Sales Order : _____ Supplier : _____

Order By : _____ Type of Claim : TP

| S/No | Part Description | QTY | Cost Price | List Price | Nett Price | S/N | Disposition By Surveyor |
|------|------------------------------------|-----|------------|------------|------------|-----|-------------------------|
| 1 | Rear bumper <i>bu</i> | 1 | | | | | ✓ |
| 2 | Rear bumper lower garnish | 1 | | | | | ? |
| 3 | Rear bumper guide LH | 1 | | | | | ? |
| 4 | Rear bumper guide RH | 1 | | | | | ✓? |
| 5 | Rear bumper clips | 10 | | | | | ✓ |
| 6 | Rear bumper reflector LH <i>bu</i> | 1 | | | | | X |
| 7 | Rear bumper reflector RH <i>bu</i> | 1 | | | | | X |
| 8 | 0 | 0 | | | | | |
| 9 | 0 | 0 | | | | | |
| 10 | 0 | 0 | | | | | |
| 11 | 0 | 0 | | | | | |
| 12 | 0 | 0 | | | | | |
| 13 | 0 | 0 | | | | | |
| 14 | 0 | 0 | | | | | |
| 15 | 0 | 0 | | | | | |
| 16 | 0 | 0 | | | | | |
| 17 | 0 | 0 | | | | | |
| 18 | 0 | 0 | | | | | |
| 19 | 0 | 0 | | | | | |
| 20 | 0 | 0 | | | | | |
| 21 | 0 | 0 | | | | | |
| 22 | 0 | 0 | | | | | |
| 23 | 0 | 0 | | | | | |
| 24 | 0 | 0 | | | | | |
| 25 | 0 | 0 | | | | | |
| 26 | 0 | 0 | | | | | |
| 27 | 0 | 0 | | | | | |
| 28 | 0 | 0 | | | | | |
| 29 | 0 | 0 | | | | | |
| 30 | 0 | 0 | | | | | |

Note: If any of the quoted parts are recommended to be repaired, then an additional labour charge will be charged accordingly under supplementary.

ComfortDelGro Engineering Pte Ltd (Co.Reg.No:199506048W)

 205 Braddell Road
 Singapore 579701

Tel: 63837168 /63837118 Fax: 62815767/65462533 Email: denisteo@cdge.com.sg

TP INSURER: Sompoo Insurance Singapore Pte. Ltd. (HQ)
AIN'S FORKLIFT TRADING ENGINEERING
PARTICULARS OF CLAIM

| | | | |
|-------------------------------|--|--------------------|-------------------|
| Claim Type: | THIRD PARTY | Ref. No: | |
| Policy No: | D18MTPCVE002264 | Date of Loss: | 10/02/2019 |
| Vehicle Reg. No.: | SLM3565G | Driveable? | |
| Party At Fault: | UNKNOWN | | |
| Driver (TP): | NORRIS MARK JAMES | | |
| Make/Model: | AUDI A4, 1.4 TFSI S TRONIC (A) | Vehicle Reg. Date: | 28/03/2017 |
| Vehicle Colour: | METALLIC GREY | | |
| Engine No: | CVN032762 | Chassis No: | WAUZZZF47HA123910 |
| Odometer: | 0 KM | | |
| Paint Type: | | | |
| Total Loss? | NO | | |
| Est. Duration of Repair (day) | 5 | | |
| Present Location: | COMFORTDELGRO ENGINEERING PTE LTD (BRADDELL) | | |

| COST OF CLAIMS | Amount |
|--------------------------|-----------------|
| Parts | 1,146.60 |
| Miscellaneous Items | 0.00 |
| Labour | 1,300.00 |
| Paintwork Labour | 0.00 |
| Towing | 0.00 |
| Gross Total (S\$) | 2,446.60 |
| + GST 7.00% (S\$) | 171.26 |
| Nett Amount (S\$) | 2,617.86 |

This claim is handled by: ANDREW CORNELIUS GOH CHENG CHUAN
Generated using Merimen e-Claims Internet Estimation & Adjusting System

REPAIR DETAILS**Reference**

Part Source: MRM-SG Version: 1.0 (Last Synchronised: 24 Apr 2019)

Parts: 143 AUDI A4 1.4 TFSI S TRONIC (A) (Catalogue:Merimen Singapore 1.0)

Labour: Repairer's (Price-denominated Standard List)

Print Code: ComfortDelGro Engineering Pte Ltd/SLM3565G/24/04/2019 17:14

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 *.

Estimates on Parts

| No. | Qty | Part No. | Particulars | %Disc | %Depr | Amount |
|-----|-----|----------|--------------------------------------|-------|-------|-------------|
| 1 | 1 | | *Rear bumper <i>Buc</i> | 0.00 | 0.00 | *700.00 F ✓ |
| 2 | 1 | | *Rear bumper lower garnish ? | 0.00 | 0.00 | *80.00 F X |
| 3 | 1 | | *Rear bumper guide LH ? | 0.00 | 0.00 | *18.00 F X |
| 4 | 1 | | *Rear bumper guide RH ? | 0.00 | 0.00 | *18.00 F X |
| 5 | 1 | | *Rear bumper clips <i>rec</i> | 0.00 | 0.00 | *30.00 F ✓ |
| 6 | 1 | | *Rear bumper reflector LH <i>SVC</i> | 0.00 | 0.00 | *18.00 F X |
| 7 | 1 | | *Rear bumper reflector RH <i>SVC</i> | 0.00 | 0.00 | *18.00 F X |

F=Franchise part.

| | |
|------------------------------------|-----------------|
| Sub Total (S\$) | 882.00 |
| + Margin on L,N Items 30.00% (S\$) | 264.60 |
| Total Parts (S\$) | 1,146.60 |

ComfortDelGro Engineering Pte Ltd/SLM3565G/24/04/2019 17:14. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

Estimates on Miscellaneous Items

There are no new miscellaneous items selected.

Estimates on Labour

| No | Particulars | Lab.Type | Amount |
|--------------------------------|---|----------|-----------------|
| Labour Items | | | |
| 1 | To panel beat, repair on rear bumper and affected areas | New | 240 720.00 |
| 2 | To check wiring functions | New | 80 80.00 |
| 3 | To putty and spray paint rear bumper and affected areas | New | 250 500.00 |
| Gross Labour Cost (S\$) | | | 1,300.00 |

ComfortDelGro Engineering Pte Ltd/SLM3565G/24/04/2019 17:14. Not valid without Reference section.
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< END OF ESTIMATES >

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/SMO19007220/KSD3N2
Date: 23/12/2019

REFERENCE

Handling Insurer: Sompo Insurance Singapore Pte. Ltd. Policy No: D18MTPCVE002264
Claimant Vehicle No : SLM3565G **Insured Vehicle No :** GW4352D
 Date of Loss: 10/02/2019 Nature of Claim: TP Claim No: CMTD1902021

DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: **SLM3565G**
 Make & Model: AUDI A4, 1.4 TFSI S TRONIC (A) Engine No: CVN032762
 Reg. Date: 28/03/2017 (Man. Year: 2017) Chassis No: WAUZZZF47HA123910
 Colour: Metallic Dark Grey Odometer: 52340 km
 Engine Capacity: 1395 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: 205/60R16 Rear Tyre Size: 205/60R16
 Front Left Side: Continental 8 mm Rear Left Side: Continental 8 mm
 Front Right Side: Continental 8 mm Rear Right Side: Continental 8 mm

The above values represent the remaining tyre treads depth

| COST OF CLAIMS | Repairer's | Adjuster's | Difference | Diff % |
|--|-----------------|-----------------|-----------------|--------------|
| Parts | 1,146.60 | 949.00 | 197.60 | 17.23 |
| Miscellaneous Items | 0.00 | 0.00 | 0.00 | |
| Labour | 1,300.00 | 510.00 | 790.00 | 60.77 |
| Paintwork Labour | 0.00 | 0.00 | 0.00 | |
| Towing | 0.00 | 0.00 | 0.00 | |
| Calculated Gross Total (S\$) | 2,446.60 | 1,459.00 | 987.60 | 40.37 |
| Approved Total (Overridden) (S\$) | | 1,150.00 | | |
| (S\$) | 2,446.60 | 1,150.00 | 1,296.60 | 53.00 |
| + GST 7.00/7.00% (S\$) | 171.26 | 80.50 | 90.76 | 53.00 |
| Nett Amount (S\$) | 2,617.86 | 1,230.50 | 1,387.36 | 53.00 |

INSPECTION

Date of Assignment: 24/04/2019 Present Location: ComfortDelGro Engineering Pte Ltd (Braddell)
 Date Inspected: 24/04/2019 Inspected At: ComfortDelGro Engineering Pte Ltd (Braddell)
 205 Braddell Road
 Singapore 579701
 Estimated Period of Repair: 2.0 days

Adjuster: KENNETH KONG

Manager: Hiew May Fung

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

REPAIR DETAILS**Reference****Part Source:** MRM-SG Version: 1.0 (Last Synchronised: 23 Dec 2019)**Parts:** 143 AUDI A4 1.4 TFSI S TRONIC (A) (Catalogue:Merimen Singapore 1.0)**Labour:** Repairer's (Price-denominated Standard List)**Print Code:** (Unsubmitted, no print-code for SLM3565G)**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 | | *Rear bumper | Buckled | 700.00 F | *700.00 F |
| 2 | 1 | | *Rear bumper lower garnish | Serviceable | 80.00 F | *- F |
| 3 | 1 | | *Rear bumper guide LH | Serviceable | 18.00 F | *- F |
| 4 | 1 | | *Rear bumper guide RH | Serviceable | 18.00 F | *- F |
| 5 | 1 | | *Rear bumper clips | Necessary | 30.00 F | *30.00 F |
| 6 | 1 | | *Rear bumper reflector LH | Serviceable | 18.00 F | *- F |
| 7 | 1 | | *Rear bumper reflector RH | Serviceable | 18.00 F | *- F |
| Sub Total (S\$) | | | | | 882.00 | 730.00 |
| + Margin on L,N Items 30.00/30.00% (S\$) | | | | | 264.60 | 219.00 |
| Total Parts (S\$) | | | | | 1,146.60 | 949.00 |

F=Franchise part.

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 panel beat, repair on rear bumper and affected areas | New | 720.00 | 240.00 |
| 2 | To check wiring functions | New | 80.00 | 20.00 |
| 3 | To putty and spray paint rear bumper and affected areas | New | 500.00 | 250.00 |
| Gross Labour Cost (S\$) | | | 1,300.00 | 510.00 |

Report was unsubmitted during this print-out.

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