

7260/2003

ASS. REC. BY:

REF:

CS/INC19008880/R1+d3

n2

Special Instruction:

Surveyor: KASU

## ASSIGNMENT (Office)

From (Person):

Cynthia Any

of

INC

Date/Time: 21/5/19 @ 9:35am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKW 5111D

Insured:

SJR 3441C

at Workshop m/s

Thorn Hery Street

Tel:

8263 6295

of

176 King Ming Drive #05-14

Policy No:

Claim No:

MT/1044982-001

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

13/5/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

9:45am 21/5/19

Person Contacted:

Steven

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate	✓
	SKW 5111D-X		
	SJR 3441C-CS/CTI/9005404/E/d3		
	Lump Sum \$3,150 (Red: 8936.85, 74%)		

D.O.A: 23/3/19

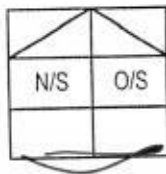
Surveyor

*Case*

REF:

# ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: **SKW 5111D**  
 at Workshop m/s \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_



(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: **SKW 5111D** Yr Regn: **2015 / 005**  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or

Make: **AWD AB 1.4** c.c: **1395**  
 Colour: **WHITE** A/C: Insured / Std / NI / NA  
 Sp.Reading: **107338** T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_  
 C/No: **WAA2228V 741022063**

Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **225/45R17**  
 R: \_\_\_\_\_

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

Front		Rear	
R/Bal.	<b>6</b> mm	R/Bal.	<b>6</b> mm
L/Bal.	<b>6</b> mm	L/Bal.	<b>6</b> mm
D.O.A.	<b>13/05/19</b>	D.O.I.	<b>24/05/19</b>

Survey held at **THIAN HENG** 3.38pm  
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time Action / Instruction

RECEIVED 13 AUG 2019

Date/Time, File Pass to?

**13/8 Typist**

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.I: (\$ **3150/-**)

☐ : Preli. Report  
☒ : Final Report

Days Of Repair: **3**

Resurvey No. of Trip: **1**

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

Survey Fee:

Transportation: \_\_\_\_\_  
 S + RS, SI \_\_\_\_\_  
 Photos \_\_\_\_\_  
 Others \_\_\_\_\_

TOTAL

250
-----

## **Nivitha (LKK Auto)**

**From:** Cynthia Ang <Cynthia.Ang@income.com.sg>  
**Sent:** Tuesday, 21 May 2019 10:44 AM  
**To:** 'assignments@lkkauto.com'  
**Subject:** RE: TP CASES FARMED OUT TO LKK ON 21/05/2019

Hi LKK,

Resend with the following details.

Thank you.

With Regards

**Cynthia Ang**  
Admin Assistant  
Motor Insurance  
T +65 6430 7900  
[www.income.com.sg](http://www.income.com.sg)

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**in** with you

PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

**From:** Cynthia Ang  
**Sent:** Tuesday, 21 May 2019 9:35 AM  
**To:** 'assignments@lkkauto.com' <assignments@lkkauto.com>  
**Cc:** Teng Ken Leong <kenleong.teng@income.com.sg>; Thio Tse Kiat <tsekiat.thio@income.com.sg>; Cynthia Ang <Cynthia.Ang@income.com.sg>  
**Subject:** TP CASES FARMED OUT TO LKK ON 21/05/2019

Dear LKK,

Please assist to survey the following vehicles as per Mr Teng's instruction :-

SN	OIC	Claim No.	Vehicle	WorkShop Name	WorkShop Address	WorkShop Contact	Survey Time	OI VEH	DOA	Additional Remarks
1	Eng Huey Huey	MT/1044569-002	SME77Z	833 MOTORSPORTS PTE LTD	160 SIN MING DRIVE, #02-09 SIN MING AUTOCITY, SINGAPORE 575722	ELDRED GOH / 83322833		SJY1049D	13/05/2019	
2	Serene Lim	MT/1043633-001	FBJ17B	AUBURN AUTO PTE LTD	176 SIN MING DRIVE #04-18 SIN MING AUTOCARE SINGAPORE 575721	eric chan / 96191525		SJR1243X	07/05/2019	
3	Serene Lim	MT/1045030-002	JLT2470	AUTOEXCEL ENGINEERING PTE LTD	160 SIN MING DRIVE SIN MING AUTOCITY #06-01	DOREEN CHAN / 64591630		SCQ7776Z	17/05/2019	
4	Fiona Shen	MT/1044243-002	SMK360Z	THIAM HENG HUAT PTE LTD	176 SIN MING DRIVE #05-14 SIN MING AUTOCARE	STEVEN / 82636295		SJN9118T	11/05/2019	
5	Muhammad Airwan	MT/1044982-001	SKW5111D	THIAM HENG HUAT PTE LTD	176 SIN MING DRIVE #05-14 SIN MING AUTOCARE	STEVEN / 82636295		SJR3441C	13/05/2019	

**Please contact workshops.**

Please revert to officer-in-charge after survey.

Thank you.

With Regards

Cynthia Ang  
Admin Assistant  
Motor Insurance  
T +65 6430 7900  
[www.income.com.sg](http://www.income.com.sg)



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you

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PLEASE CONSIDER OUR ENVIRONMENT BEFORE YOU PRINT THIS EMAIL...

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#### Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	8110G
Vehicle Details	
Vehicle No.:	SKW5111D
Vehicle to be Exported:	No
Intended Deregistration Date:	23 May 2019
Vehicle Make:	AUDI
Vehicle Model:	A3 SEDAN 1.4 TFSI (AMBIENTE)
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	CZC283242
Chassis No.:	WAUZZZ8V7G1022063
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	\$27,621.00
Original Registration Date:	30 Oct 2015
First Registration Date:	30 Oct 2015
Transfer Count:	0
Actual ARF Paid:	\$20,670.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Oct 2025
PARF Rebate Amount:	\$15,502.00
Intended COE Rebate Details	
COE Expiry Date:	29 Oct 2025
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$58,801.00
COE Rebate Amount:	\$36,024.00
<b>Total Rebate Amount:</b>	<b>\$51,526.00</b>

The information contained herein is correct as at 23 May 2019

OK

## 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	15/05/2019 14:50
Date Of Accident	13/05/2019 17:30
Exact Location Of Accident	PIE TOWARD CHANGI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW5111D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TEE KEE SIANG
NRIC No	S8678110G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86133386
Alternative Phone No	OFFICE-86133386

### Vehicle Particulars

Manufacturer	AUDI
Model	A3-1.4 SEDAN TFSI (AMBIENTE) (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA270222/1
Cover Note Number	

### Driver

Name of Driver	TEE KEE SIANG
NRIC No	S8678110G
Date Of Birth	19/08/1986
Occupation	INDOOR
Date Of Driving Pass	22/08/2008
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86133386
Fax Number	
Contact Number	OFFICE-86133386
Email Address	NOEMAIL

Address	BLK 449 JURONG WEST STREET 42 #07-210
Postcode	640449
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	AFTER RAIN
Road Surface	WET

#### 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)	5
Passenger 1	NAME: : GAN CAI NI GENDER: : FEMALE
Passenger 2	NAME: : TEE YUJIE GENDER: : MALE
Passenger 3	NAME: : HUANG PING GENDER: : FEMALE
Passenger 4	NAME: : LIAO GANG GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

SEE SKETCH PLAN.

#### 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	SJR3441C
Vehicle Make/Model/Colour	MITSUBISHI/LANCER EX
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MUHAMMAD SHAFIQ HIDAYAT BIN MOHAMMAD SHAN
NRIC/Passport Number	S9603843G
Contact Number	96474723
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	TAN KEE SIANG
Approximate Age	
Injuries Sustain	SLIGHT - NECK & BACK PAIN
Injured person in which vehicle?	SKW5111D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 2

Name	GAN CAI NI
Approximate Age	
Injuries Sustain	SLIGHT RIGHT ARM & LEFT LEG
Injured person in which vehicle?	SKW5111D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 14.05.19

Driver's Signature

(If driver is not the policyholder)

Date & Time: 14.05.19

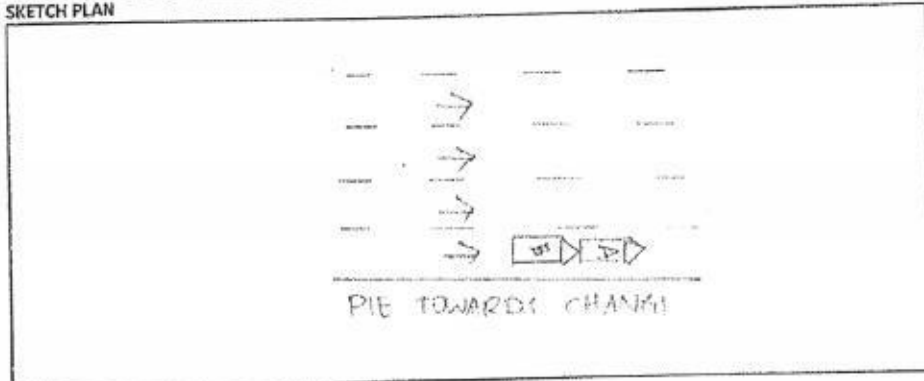
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Sketch Plan Pg. 2

Date of accident: 13-05-19 Time: 1730HRS Location: PIE TOWARDS CHANGI  
 My Vehicle A: SKW5111D Vehicle B: SJR3441C Vehicle C: \_\_\_\_\_  
 SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ON THE EXTREME RIGHT LANE  
 ON PIE TOWARDS CHANGI DIRECTION. TRAFFIC WAS  
 HEAVY. THE CAR IN FRONT OF ME SLOWED DOWN  
 AND I ALSO SLOWED DOWN. SUDDENLY, SJR3441C  
 WHICH WAS BEHIND ME COULDN'T BRAKE IN TIME  
 AND HIT ONTO THE REAR OF MY CAR.  
 Late report as I was still not feeling well after  
 to Repair other Workshop accident

Remarks: Please forward a copy of my efile accident report to:  
 My workshop: THIAM HENG HUAT PREUTP  
 Email address: thiamhenghuat@gmail.com  
 & myself  
 Email address:

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under  
 you own policy. Kindly check with your own insurer for more information.

## DECLARATION

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

Policyholder's Signature

Date & Time: 14-05-19 12:00

Driver's Signature

(If driver is not the policyholder)

Date & Time: 14-05-19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



## Sketch Plan #2 Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190515/7010

1 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20190515/7010

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/05/2019 12:00		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TEE KEE SIANG			Address: APT BLK 449 JURONG WEST STREET 42 #07-210 SINGAPORE 640449		
ID Type / ID No.: NRIC NO / S8678110G			Contact No.: Home/Office:		Mobile: 86133386
Nationality: MALAYSIAN			Email: siangni1819@gmail.com		
Sex: Male	Age: 32	Date of Birth: 19/08/1986	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Bread baker			Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/05/2019 17:30	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY TOWARDS CHANGI				
Weather: Clear		Road Surface: Wet	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR3441C	Car	MITSUBISHI	LANCER EX	Maroon	Slightly Damaged	1
SKW5111D	Car	AUDI	A3 SEDAN 1.4 TFSI (AMBIENTE)	White	Slightly Damaged	4

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SKW5111D	AXA INSURANCE SINGAPORE PTE LTD	GA270222	30/10/2018	29/10/2019



**SINGAPORE  
POLICE FORCE**



T/20190515/7010

2 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20190515/7010

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver:			
Name	MUHAMMAD SHAFIQ HIDAYAT BIN MOHAMAD SHAM	ID No.	S9603843G
Related Vehicle	SJR3441C (Car)	Contact No.	96474723
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver:			
Name	TEE KEE SIANG	ID No.	S8678110G
Related Vehicle	SKW5111D (Car)	Contact No.	86133386
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	14/05/2019	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger:			
Name	GAN CAI NI	ID No.	S8584781C
Related Vehicle	SKW5111D (Car)	Contact No.	91817138
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/05/2019	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

## Brief Details.

I WAS TRAVELLING ON THE EXTREME RIGHT LANE ON PIE TOWARDS CHANGI DIRECTION. TRAFFIC WAS HEAVY. THE CAR IN FRONT OF ME SLOWED DOWN AND I ALSO SLOWED DOWN. SUDDENLY SJR3441C WHICH WAS BEHIND ME COULD NOT BRAKE IN TIME AND HIT ONTO THE REAR PORTION OF MY CAR. AFTER THE ACCIDENT, I FELT PAIN ON THE NECK AND BACK AREA WHILE MY PASSENGER, GAN CAI NI SUFFERED PAIN ON HER RIGHT ARM AND LEFT LEG AREA. BOTH OF US WENT TO MT. ALVERNIA TO SEE DOCTOR AND WAS GIVEN 3 DAYS OF MC



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20190515/7010

3 of 4

Report No. T/20190515/7010

CONTINUATION OF REPORT



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20190515/7010

4 of 4

Report No. T/20190515/7010

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
ONG YONG HOCK  
Contact No.: 65476436

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
15/05/2019 12:00

Classification Of Case:

# Repair Estimate

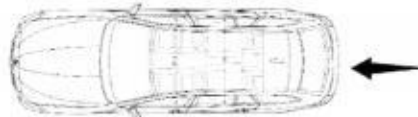
## Thiam Heng Huat

176 Sin Ming Drive #05-14 Sin Ming Autocare Singapore 575721

Mobile: 82636295 Email: thiamhenghuat@gmail.com

Make/Model: AUDI A3 1.4 SEDAN TFSI  
Engine/Chassis No.: WAUZZZ8V7G1022063  
Date of accident:  
Damaged area: Rear

Date: 22/05/2019  
Claim Type: TP  
VRN: SKW5111D



List items				
S/N	Parts description	QTY	UNIT PRICE	AMOUNT
1	Rear bumper <i>de-</i>	1	\$ 1,667.00	\$ 1,667.00
2	Rear bumper guide- LHS/RHS <i>X</i>	2	\$ 46.00	\$ 92.00
3	Rear bumper locking pin <i>X</i>	1	\$ 59.00	\$ 59.00
4	Rear bumper light reflector- LHS/RHS <i>X</i>	2	\$ 68.00	\$ 136.00
5	Rear bumper lower <i>cut</i>	1	\$ 393.00	\$ 393.00
6	Rear reinforcement beam <i>bt</i>	1	\$ 677.00	\$ 677.00
7	Rear reinforcement beam bracket- LHS/RHS <i>X</i>	2	\$ 67.00	\$ 134.00
8	Rear bumper inner guide- LHS/RHS <i>X</i>	2	\$ 118.00	\$ 236.00
9	Rear cross panel <i>repair</i>	1	\$ 407.00	\$ 407.00
10	Cross panel reinforcement panel <i>X</i>	1	\$ 722.00	\$ 722.00
11	Cross panel connecting plate <i>X</i>	1	\$ 223.00	\$ 223.00
12	Rear weatherstrip <i>X</i>	1	\$ 197.00	\$ 197.00
13	Rear silencer <i>X</i>	1	\$ 731.00	\$ 731.00
14	Silencer bracket <i>X</i>	2	\$ 81.00	\$ 162.00
15	Exhaust chrome trim n/s <i>X</i>	1	\$ 323.00	\$ 323.00
16	Tail lamp <i>X</i>	2	\$ 994.00	\$ 1,988.00
17	Tail lamp lower bracket <i>X</i>	2	\$ 78.00	\$ 156.00
			<b>Subtotal</b>	<b>\$ 8,303.00</b>
			<b>List discount</b>	<b>5.00%</b>
			<b>Total</b>	<b>\$ 7,887.85</b>

1430

501

2324

5%

2207.80

Special nett items				
No.	Parts description	QTY	UNIT PRICE	AMOUNT
1	Rear parking aid <i>new</i>	2 <i>new</i>	\$ 415.00	\$ 1,660.00
2	Silencer dual clips <i>X</i>	2	\$ 52.00	\$ 104.00
3	Rear bumper clips <i>new</i>	10	\$ 6.50	\$ 65.00
4	Rear cross panel sealant <i>X</i>	1	\$ 120.00	\$ 120.00
5	Sundries <i>X</i>	1	\$ 50.00	\$ 50.00
			<b>Total</b>	<b>\$ 1,999.00</b>

830

S/N - 895

# Repair Estimate

Labour			
No.	Description	Work unit	Amount
1	To dismantle / renew accident damaged portion. To panel beat, reshape, straighten, orientate and align repair / replacement parts.	5	\$ <del>1,000.00</del> 400
2	To disconnect rear wire harness of electrical components to facilitate repairs, reconnect and check functions including taillamp lightings.	0.25	\$ 50.00
3	To remove and refit, straighten and re-adjust exhaust pipe and replace exhaust silencer.	0.5	\$ 100.00 X n
4	Supply spray paint material and necessary items to respray rear bumper, rear cross panel and other affected area / panel.	5	\$ <del>1,000.00</del> 400
5	To rust proof all affected portions after repair.	0.5	\$ 100.00 X
Total labour			\$ 2,250.00

Estimate Grand Total	\$ 12,136.85	850
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LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

Rasm

Hp 90010068

3 days

22/05/19 @ 1530

Resurvey  
after  
repair

2207.80

895.00

850.00

3952.80

20%

3162.24

4/3-3,150

3 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

DAMAGE ASSESSMENT REPORT				
NTUC INCOME INSURANCE CO-OPERATIVE LTD		Ref: CS/INC19008880/R1td3n2		
73 BRAS BASAH ROAD		Date: 13-08-2019		
#05-01 NTUC TRADE UNION HOUSESINGAPORE				
189556				
ATTN: MUHAMMAD AIRWAN		Code: INC		
<b>1. Policy Particulars :- THIRD PARTY CLAIM</b>				
Insured Veh.	SJR 3441C	Veh. Inspected	SKW 5111D	
Policy No.		Coverage (\$)	0.00	
Claim No.	MT/1044982-001	Excess (\$)	0.00	
Assign From	CYNTHIA ANG	Assign Date	21/05/2019	
<b>2. Vehicle Particulars &amp; Condition</b>				
Make & Model	AUDI A3 1.4	c.c	1395	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	WAUZZZ8V7G1022063	Colour	WHITE	
Odometer	107338 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	SPORTS RIM	
General	FAIR			
<b>3. Conditions of Tyres</b>				
	Size	Make	Balance	
R/H Front Tyre	225/45 R17	MICHELIN	6 mm	
L/H Front Tyre	225/45 R17	MICHELIN	6 mm	
R/H Rear Tyre	225/45 R17	MICHELIN	6 mm	
L/H Rear Tyre	225/45 R17	MICHELIN	6 mm	
<b>4. Description of Damages</b>				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
<b>5. General Information</b>				
Accident Date	13/05/2019	Inspect Date / Time	22/05/2019 ( 03:38 PM )	
Survey held at	THIAM HENG HUAT PTE LTD 176 SIN MING DRIVE #05-14 SINGAPORE 575721			
<b>5a. Remarks</b>				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
<b>5b. Estimate Days of Repair</b>				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



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Page No.:1 of 2

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SKW 5111D

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b>REPLACEMENT OF PARTS</b>				
1	REAR BUMPER	DEFORMED	1,667.00	1,430.00
2	REAR BUMPER GUIDE-LHS/RHS @\$46.00	NOT NECESSARY	92.00	-
1	REAR BUMPER LOCKING PIN	NOT NECESSARY	59.00	-
2	REAR BUMPER LIGHT REFLECTOR-LHS/RHS @\$68.00	NOT NECESSARY	136.00	-
1	REAR BUMPER LOWER	CUT	393.00	393.00
1	REAR REINFORCEMENT BEAM	BENT	677.00	501.00
2	REAR REINFORCEMENT BEAM BRACKET-LHS/RHS @\$67.00	NOT NECESSARY	134.00	-
2	REAR BUMPER INNER GUIDE-LHS/RHS @\$118.00	NOT NECESSARY	236.00	-
1	REAR CROSS PANEL	TO REPAIR SEE LABOUR	407.00	-
1	CROSS PANEL REINFORCEMENT PANEL	NOT NECESSARY	722.00	-
1	CROSS PANEL CONNECTING PLATE	NOT NECESSARY	223.00	-
1	REAR WEATHERSTRIP	NOT NECESSARY	197.00	-
1	REAR SILENCER	NOT NECESSARY	731.00	-
2	SILENCER BRACKET @\$81.00	NOT NECESSARY	162.00	-
1	EXHAUST CHROME TRIM N/S	NOT NECESSARY	323.00	-
2	TAIL LAMP @\$994.00	NOT NECESSARY	1,988.00	-
2	TAIL LAMP LOWER BRACKET @\$78.00	NOT NECESSARY	156.00	-
	LESS 5% DISCOUNT		-415.15	-116.20
			7,887.85	2,207.80
<b>SPECIAL NETT ITEMS</b>				
4	REAR PARKING AID @\$415.00 (SN)	NOT WORKING (2 PCS ONLY)	1,660.00	830.00
2	SILENCER DUAL CLIPS @\$52.00 (SN)	NOT NECESSARY	104.00	-
10	REAR BUMPER CLIPS @\$6.50 (SN)	NECESSARY	65.00	65.00
1	REAR CROSS PANEL SEALANT (SN)	NOT NECESSARY	120.00	-
1	SUNDRIES (SN)	NOT NECESSARY	50.00	-
			1,999.00	895.00

Report Ref No. CS/INC19008880/R1td3n2



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Page No.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<b>LABOUR</b>			
	TO DISMANTLE/RENEW ACCIDENT DAMAGED PORTION.TO PANEL BEAT,RESHAPE,STRAIGHTEN, ORIENTATE AND ALIGN REPAIR/REPLACEMENT PARTS.INCLUSIVE OF THE REPAIR OF REAR CROSS PANEL.		1,000.00	400.00
	TO DISCONNECT REAR WIRE HARNESS OF ELECTRICAL COMPONENTS TO FACILITATE REPAIRS,RECONNECT AND CHECK FUNCTIONS INCLUDING TAILLAMP LIGHTINGS.		50.00	50.00
	TO REMOVE AND REFIT,STRAIGHTEN AND RE-ADJUST EXHAUST PIPE AND REPLACE EXHAUST SILENCER.	NOT NECESSARY	100.00	-
	SUPPLY SPRAY PAINT MATERIAL AND NECESSARY ITEMS TO RESPRAY REAR BUMPER,REAR CROSS PANEL AND OTHER AFFECTED AREA/PANEL.		1,000.00	400.00
	TO RUST PROOF ALL AFFECTED PORTIONS AFTER REPAIR.	NOT NECESSARY	100.00	-
			2,250.00	850.00
	<b>GRAND TOTAL</b>		<b>12,136.85</b>	<b>3,952.80</b>
	<b>RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)</b>			<b>3,150.00</b>

Report Ref No. CS/INC19008880/R1td3n2

MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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