

redo calculation Slip #

INS CASE OWNER: CC 4, III 1900 8976, 72 1/2 LKK IDAC

Surveyor: MTH DO: ASSIGNMENT MTH Date / Time: 11/5/19 Registered in Merimen: 11/5/19

Pre-assign / CCU / FTE



Insured Vehicle No.: SHH 73234

Name of Insured: LTP

Insured Tel No.: HP:

Excess Sec II :SS D.O.A: 13/5/19

Is driver the owner? ( YES / NO ) Nature of Accident:

If NO, Driver Name / Age: TAN HENY BOON

Driver Tel No.: (V/L: YES / NO )

Claim No.: MLT19050240

Policy No.: M10M0015

Make / Model: HUMMER

Place of Accident: CENTRAL BLVD TWO SHEARPS

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability: Final ? Yes / No

SHH 7892



INSRS: Ding  
WSP: Anto  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date/Time		STAGE	DATE / PIC
	SHH 7892 - 13/5/19 11:00 AM / 11:00 AM	Non-Reporting Ir (1st)	
	SHH 7892 - 13/5/19 11:00 AM / 11:00 AM	Non-Reporting Ir (2nd)	
		Non-Reporting Ir (Final)	
		Notification Ir (if non-pickup)	
		Call OI	
		After call Ir to OI	
11/7/19	seek liability via merimen	Documentation Check List: Handler	Typist
18/7/19	liability clear via merimen	Notification Ir (if non-pickup)	
18/7/19	file pass to typist type report	After call Ir to OI	
22/7/19	seek mandate via merimen	Authorisation To Act	
6/8/19	mandate approve via merimen	Release Voucher	
		Final Repair Bill	
		Car Rental Invoice	
		Towing Invoice	
		LTA / GIA	
		Medical Bill	
		PDR	
		Mandate/Reject Instruction	
		LOD	
		Payment Breakdown Form	
		Post-Repair Photos	
		Others	

PRELIMINARY ADVICE	Date/Time:	Sent By:
FINALIZATION	Date/Time:	Confirm with
Repair Cost:	SS	(days) Reduction:
FINAL SETTLEMENT	Date/Time: 14/8/19	Confirm with: Eddy
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No.: N/A
Repair Cost:	SS 1926.00	
Loss of Rental (LOR):	SS 442.68 (4 days) x 110.67	
Loss of Use (LOU):	SS 160.00 (5 days) x 4 days	
Loss of Income (LOI):	SS (5 x days)	
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LO <input type="checkbox"/> [Tick only one]		
GIA/LTA Search	SS 7.45	
Medical:	SS	
Disbursement	SS	(e.g. Tow / Independent)
Legal Cost	SS	
Total:	SS 2536.13	Global Sum SS: 2500.00
FINAL PAYMENT	Date/Time:	Confirm with:
Payee 1:	SS 2500.00	Name 1: Ding Automotive Pte Ltd
Payee 2 (Strike if N.A.)	SS	Name 2:
Payee 3 (Strike if N.A.)	SS	Name 3:

## ASSIGNMENT

From:

Date:

02.5.2019

Estimated Cost:

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

To Inspect Vehicle No:

SHA 7832

at Workshop m/s

Ding Automotive

of

31 Corporation Road

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 Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

3

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

"up"

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SHA 7832

Yr Regn:

2015, March

Type:

M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Myundai I40

C.C.

1685

Colour

Yellow

A/C:

Insured / Std / NI / NA

Sp. Reading

53/235

T/Radio:

Insured / Std / NI / NA

Eng/No:

KMHLS414MF4 06071

C/No:

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:

205/60R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Triangle

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

22/5/190/180

Survey held at

Ding Auto

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt/O/S

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

Date / Time

Action / Instruction

7/8/19

Confirm US \$1800.00 with 3 working days

CRD - \$ 3318.30  
6571

Date/Time, File Pass to?

☐

Prel. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I. (\$) )

TO :

FAX NO:

**ESTIMATE REPORT** 1ST Quotation

18/05/2019 14:43

JOB-NO: 50111657

**OWNER'S PARTICULARS**

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE  
SINGAPORE 575717 0

64739522

**VEHICLE DETAILS**

LICENSE NO: SHA0783Z

TRANS: AUTO

CHASSIS: KMHLB41UMFU066071

MAKE / MODEL: HYUNDAI / i40

ENGINE: D4FDDU371615

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 2

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
<b>LABOUR</b>							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	450.00	0.00	450.00		Y	300
2 DIAGNOSTIC VEHICLE & RESETTING HEADLAMP ADJUSTMENT	1.00	250.00	0.00	250.00		Y	150
3 CONDUCT 4 WHEEL ALIGNMENT	1.00	120.00	0.00	120.00		Y	60
4 REMOVE & REFIT WHEEL CAP & CHECK UNDERCARRIAGE NECESSARY ADJUSTMENT	1.00	80.00	0.00	80.00		Y	30
5 SUNDRIES	1.00	50.00	0.00	50.00		Y	20
6 RESPRAY FRONT BUMPER	1.00	230.00	0.00	230.00		Y	200
7 RESPRAY FRONT FENDER RHS	1.00	230.00	0.00	230.00		Y	200
TOTAL:		1,410.00	0.00	1,410.00			
<b>MATERIALS</b>							
1 FRONT BUMPER V2	1.00	699.58	139.92	559.66	L	Y	de
2 FRONT BUMPER RETAINER RH	1.00	42.98	8.60	34.38	L	Y	de
3 FRONT BUMPER RETAINER LH	1.00	42.98	8.60	34.38	L	Y	X
4 HEAD LAMP RHS	1.00	1,808.10	361.62	1,446.48	L	Y	X / 1/2
5 FRONT FENDER RHS	1.00	623.86	124.77	499.09	L	Y	de
6 FRONT FENDER INNER SHIELD RHS	1.00	175.00	35.00	140.00	L	Y	X / NV
7 FRONT WHEEL CAP RHS	1.00	265.80	53.16	212.64	L	Y	de
8 FRONT BUMPER CLIP SET	1.00	35.00	0.00	35.00	S	Y	NA
9 FRONT FENDER QTR GARNISH CLIP SET	1.00	15.00	0.00	15.00	S	Y	X / NV
TOTAL:		3,706.30	731.67	2,976.63			
TOTAL PARTS & LABOUR:		5,118.30	731.67	4,386.63			

EXCESS/LOADING: S\$ 0.00

No. Of Day: 2

RE-SURVEY: BEFORE/AFTER PAINTING

PART-BY-PART OR LUMP SUM: S\$

DATE OF SURVEY: 22/5/19 1800 WP

SURVEYED BY: Tanjiah

CONTACT NO: 9749744

FAX NO:

surellikanto.com

**CLAIM DETAILS**

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
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NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:

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:

**Nivitha (LKK Auto)**

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**From:** Motor Claim - III <motorclaim@iii.com.sg>  
**Sent:** Tuesday, 21 May 2019 4:14 PM  
**To:** taxiscs@stengg.com; 'sur@lkkauto.com'; admin-d@lkkauto.com  
**Cc:** Sundari Nagarajan - III  
**Subject:** RE: ACCIDENT INVOLVING SHA783Z AND SHA7323Y ON 13/05/2019 ARRANGE SURVEY  
**Attachments:** SAS2602009.pdf; receipt-20190518-142240.pdf

Dear Sir / Mdm,

Please conduct a survey on TP vehicle SHA783Z and let us have your report urgently.

This claim will be handled by Ms Sundari.

\*Kindly upload this survey request email to merimen.

Thank You.

*Best Regards,*  
**Gabriel Wee**



64 Cecil Street; #05 - IOB Building  
Singapore 049711  
Tel: 6347 6100, Ext - 248

*P. Nelson*

*T: 4.23pm*

*V: 1h*

*E: V*

**From:** taxiscs@stengg.com [mailto:taxiscs@stengg.com]  
**Sent:** 21 May, 2019 2:49 PM  
**To:** Motor Claim - III <motorclaim@iii.com.sg>  
**Subject:** RE: ACCIDENT INVOLVING SHA783Z AND SHA7323Y ON 13/05/2019 ARRANGE SURVEY

Dear officer ,

We choose LKK Auto Consultants Pte Ltd .

**Thank You**

**Best Regards**  
**Ding Automotive Pte Ltd**  
**Nelson Wong**  
**Hp : 96891857 -83039588**

From: "Motor Claim - III" <motorclaim@iii.com.sg>  
To: Taxis Customer Service/KAS/CBG/ST Kinetics@ST Engineering  
Date: Tue 21 May 2019 09:52 AM  
Subject: RE: ACCIDENT INVOLVING SHA783Z AND SHA7323Y ON 13/05/2019 ARRANGE SURVEY

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\*\*\*WARNING! THIS EMAIL ORIGINATES FROM OUTSIDE ST ENGINEERING.\*\*\*

Dear Sir / Mdm,

We acknowledge receipt of your email.

We propose using one of the following motor surveyors:

- LKK Auto Consultants Pte Ltd
- Vicom Assessment Centre Pte Ltd

Please notify us within 02 days of receipt of this letter for surveyor agreed on or if you have any objections to the above list.

*Best Regards,*  
**Gabriel Wee**



64 Cecil Street; #05 - IOB Building  
Singapore 049711  
Tel: 6347 6100, Ext – 248

**From:** [taxiscs@stengg.com](mailto:taxiscs@stengg.com) [mailto:[taxiscs@stengg.com](mailto:taxiscs@stengg.com)]  
**Sent:** 21 May, 2019 9:03 AM  
**To:** Motor Claim - III <[motorclaim@iii.com.sg](mailto:motorclaim@iii.com.sg)>  
**Cc:** [ACCOUNTS@DINGAUTO.SG](mailto:ACCOUNTS@DINGAUTO.SG); [ADMIN@DINGAUTOMOTIVE.COM.SG](mailto:ADMIN@DINGAUTOMOTIVE.COM.SG); Dd hashim <[dd.hashim@dingauto.sg](mailto:dd.hashim@dingauto.sg)>; [Claims@dingautomotive.com.sg](mailto:Claims@dingautomotive.com.sg); [accounts@dingautomotive.com.sg](mailto:accounts@dingautomotive.com.sg)  
**Subject:** ACCIDENT INVOLVING SHA783Z AND SHA7323Y ON 13/05/2019 ARRANGE SURVEY

Dear Officer ,

Please arrange surveyor come onto Survey **SHA783Z**

The vehicle **SHA783Z** already in 31 Corporation Road 649825 .

**Thank You**

**Best Regards**  
**Ding Automotive Pte Ltd**  
**Nelson Wong**  
**Hp : 96891857 -83039588**

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India International Insurance Pte Ltd.

Registration No. 198703792-K

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India International Insurance Pte Ltd.

Registration No. 198703792-K

## View Received Message

This mail is associated with :

**\*SHA783Z (MCT19050340)**  
**[SHA7323Y]**

TP  
CITYCAB PTE LTD  
May 13 2019 10:00PM  
[COMFORT TRANSPORTATION PTE LTD]  
Ding Auto Pte Ltd

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**From** India International Insurance Pte Ltd (HQ) (III\_SG), sent on 17/07/2019 12:20 PM.  
**To** LKK\_HQ  
**Subject** Alert - Adj Mandate Approved (S\$0.00) - SHA783Z - Claim Handler: Sundari Nagarajan

Approved:0.00:Request video from TP

### DOCUMENTS SUMMARY

There are no documents.



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0150445B



IAN TAN CHOON HIAN

陳俊賢

Race

CHINESE

Date of Birth  
04-03-1954

Sex  
M

Country of Birth  
SINGAPORE



NRIC No. S0150445B



Blood Group

Date of issue

A+ 29-12-1995

APT BLK 423 BUKIT BATOK WEST AVENUE 2 #03-137  
SINGAPORE 650423

NRIC No. S0150445B

Date: 23/05/2016

REPUBLIC OF SINGAPORE DRIVING LICENCE



IAN TAN CHOON HIAN

Date of Birth: 04 May 1954  
Date of Issue: 15 Jan 2005



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

VALID DATE

Class 1 Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver, and motor tractor/vehicles <= 2000 kg

11 Dec 1972

S / No. 9000320503

S0150445B

Licence No. S0150445B

Nº 426A

Land Transport Authority

VOCATIONAL LICENCE

Licence No.: S0150445B

Name: IAN TAN CHOON HIAN

Issue Date: 18/11/2005

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description

Issue Date

02 TAXI VL

22/12/2004



Vehicle No: SHA 7832 (Hire Relief)

Reporting Date: 14/5/19 Time: 1430 hrs

Accident Date: 13/5/19 Time: 223 hrs

[OD TP WC / Cash] [PG: 1] [SPD: 5 Km/H]

Mileage: 529098

[HP: 97929792] [Weather Condition: Clear Raining / other: ] [Road surface: Wet Dry / Other: ]

[Location: Along Marina Blvd Junction of Sheares Ave]

TP1: Number Plate SHA7323Y Name: Tan Cheng Boon NRIC: S7203602H HP: —

TP2: Number Plate — Name: — NRIC: — HP: —

TP3: Number Plate — Name: — NRIC: — HP: —

[Witness: ] [HP: ] [Tow: Y/N]

NO

## View Received Message

This mail is associated with :

**\*SHA783Z (MCT19050340)**  
**[SHA7323Y]**

TP  
CITYCAB PTE LTD  
May 13 2019 10:00PM  
[COMFORT TRANSPORTATION PTE LTD]  
Ding Auto Pte Ltd

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**From** India International Insurance Pte Ltd (HQ) (III\_SG), sent on 06/08/2019 10:31 AM.  
**To** LKK\_HQ  
**Subject** Alert - Adj Mandate Approved (S\$2536.13) - SHA783Z - Claim Handler: Sundari Nagarajan

Approved:2536.13:Please request TP WS to raise Tax Invoice for Cost of repairs in III's name

### DOCUMENTS SUMMARY

There are no documents.

**DING AUTOMOTIVE PTE LTD**

Blk 10 #01-20 Sin Ming  
Industrial Est Sec C  
Singapore 575645

*Without Prejudice  
to our driver's Injury claim*

OUR REF: 50111657/TP/SHA783Z/AD/13/05/2019/DD  
YOUR REF: SHA7323Y/--  
10 July 2019

To: MOTOR CLAIMS DEPARTMENT  
INDIA INTERNATIONAL INSURANCE  
64 CECIL STREET #04/#05  
IOB BUILDING  
SINGAPORE 049711

ACCIDENT INVOLVING : SHA783Z AGAINST SHA7323Y ON 13/05/2019  
LOCATION ALONG : MARINA BLVD JUNCTION OF SHEARES AVE  
We refer to the above matter:

	Rate Per Day	Repair/ Claims Day	Amount Before GST	GST 7%	Amount After GST
Cost of Repair	\$ -	4	\$ 1,800.00	\$ 126.00	\$ 1,926.00
Loss Of Rental	\$ 103.43	4	\$ 413.72	\$ -	\$ 413.72
Loss Of Income	\$ 80.00	4	\$ 320.00	\$ -	\$ 320.00
LTA/GIA Search Fee	\$ -	0	\$ 6.96	\$ 0.49	\$ 7.45
Towing Fee	\$ -	0	\$ -	\$ -	\$ -
Surveyor Fee	\$ -	0	\$ -	\$ -	\$ -
Total	\$ 183.43	4	\$ 2,540.68	\$ 126.49	\$ 2,667.17

The accident was caused solely by the negligence of your insured and as a results , We had incurred the following costs of repair and losses of our insurer:

Enclosed are copies of the following documents for your perusal:

☺	Repair Estimate	☺	Discharge Voucher
☺	GIA Report/Accident Police Report	☺	Certificate Of Insurance
☺	LTA 3 <sup>rd</sup> Party Search Fee	☺	Final Bill/Repair Tax Invoice
☺	Mileage Record	☺	Confirmation Finalize/Liability Email Copy
☺	Rental Invoice	☺	Letter Of Demand
☺	Letter Of Authority	☺	

Our insurer has authorized DING AUTOMOTIVE PTE LTD to deal with the claim in this accident case and also to receive and deal/negotiate with all payment as stated above.  
Please look into our client's claim and revert soonest as possible.

Your Sincerely,  
DD HASHIM  
DING AUTOMOTIVE PTE LTD  
HP:81160811  
FAX:64520614

# LETTER OF AUTHORITY

---

ACCIDENT

INVOLVING SHA 783 Z & SHA 7323Y ON MAY 13<sup>th</sup> 2019

I, IAN TAN EMOON HIAN NRIC NO. S0150445/B of

citycab pte ltd owner/ hirer of the Vehicle Registration

No. SHA 783 Z hereby authorize **Ding Automotive Pte**

**Ltd** to submit, correspond, negotiate and settle my claim for cost of repair and uninsured losses arising from the above accident.

I further authorize that agreed settlement sum for cost of repair, loss of income and rental, survey report fee, third party vehicle insurance particulars enquiry fee etc. Be made in favour of the **Ding Automotive Pte Ltd** and that the said payment be forwarded to them as full and final discharge of my claim.

SIGNED BY:



---

DATE:

May 14<sup>th</sup> 2019

---

## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

Without Prejudice  
to our driver's Injury claim

India Ref: MCT19050340  
Claimant Ref: SHA 783Z

We/I, DING AUTOMOTIVE PTE LTD ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 2,500.00 (GLOBAL SUM) (repair cost); S\$ 0.00 (loss of use/rental); S\$ 0.00 (search fee); vehicle no. SHA 783Z that was damaged pursuant to the accident which occurred on 13/05/2019 (date) at CENTRAL BLVD TWDS SHEARES AVE (location) involving vehicle no. SHA 7323Y (insured vehicle). This is pursuant to the inspection conducted on 22/05/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CITYCAB PTE LTD ("the third party claimant") of vehicle no. SHA 783Z to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHA 783Z (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

We/I authorize you to pay the total amount of S\$ 2,500.00 to DING AUTOMOTIVE PTE LTD.

Dated this 14 day of 03 20 19

#### CLAIMANT:

Signature:

Signed by "the workshop" (with chop)

Name:

Kelly Ding

NRIC:

S7907353 E

Address:

Blk 10, Sin Ming

Nationality:

Occupation:

#### WITNESS:

Signature:

Signed by appointed Surveyor

Name:

LKK Auto Consultants Pte Ltd

NRIC:

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

Address:

Nationality:

Occupation:



**DING AUTOMOTIVE PTE LTD**

Business Reg. No : 201619222G

BLK 10, #01-20 SIN MING IND EST. SEC C, SINGAPORE 575645

Tel: 6452 1208 Fax: 6452 0614

**TAX INVOICE****INDIA INTERNATIONAL INSURANCE PTE LTD**IOB BUILDING  
64 CECIL STREET #04-05  
SINGAPORE 049711ATTN : MOTOR CLAIMS DEPT  
TEL : FAX :**INVOICE** : I-000726  
**DATE** : 07/08/2019  
**GST REG NO** : 201619222G  
**TERMS** : C.O.D.  
**PO NO** : SHA7323Y  
**OUR REF** : SHA783Z  
**PAGE** : 1 of 1

ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
1.	Cost of repair-SHA783Z	1	1,800.00	1,800.00
<b>REMARKS :</b> Job card:50111657 Your ref:CC4/III19008976/T1wb3 (SHA7323Y) Oic:Ms Vivian (LKK) Doa:13/5/2019		<b>SUB TOTAL</b>	:	1,800.00
		<b>GST</b>	:	126.00
		<b>TOTAL SGD</b>	:	<b>1,926.00</b>
		<b>DEPOSIT</b>	:	
		<b>O/S BALANCE</b>	:	

FOR DING AUTOMOTIVE PTE LTD

Authorised Signature

Customer Signature

I have inspected and hereby confirmed that  
the job done and the amount due herein  
are entire to my satisfaction

Our Ref: CC19050365



Date: 14 May 2019

## TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	13/05/2019 @ 22:13 hrs
ALONG	ALONG MARINA BLVD JUNCTION OF SHEARES AVE
INVOLVING	SHA7323Y

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA0783Z** (the "Taxi"). The Taxi was hired to **IAN TAN CHOON HIAN IC NO S0150445B** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$110.67** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay  
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.





Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 18 May 2019 / 14:22:40

Receipt Date/Time : 18 May 2019 / 14:21:35

## Tax Invoice/Receipt

Receipt No. : ITNET-00000-190518-001204

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHA7323Y As at 13 May 2019/22:15:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SHA7323Y Enquiry Fee 20190518142021072509	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		7.00	0.49	7.49
<b>Rounding Difference</b>				0.04
<b>Total Amount Payable</b>				7.45
<b>Paid By</b>				
	xxxxxxxxxxxx0979	Credit Card: Visa /MasterCard		7.45
<b>Total</b>				7.45
<b>Cash Change</b>				0.00
<b>Tendered Amount</b>				7.45
<b>Excess Refundable Amount</b>				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

...CLAIM SUBFOLDER...(Pending for Survey Report)  
Direct Settlement

CLAIM SUBFOLDER TRACKING							
Case	Notified	Est Submitted	Adj Assigned	Adj Rpt	Adj Submitted	Ins Auth'd	Status
Main	22 May 2019 <a href="#">Edit Reg</a>		21 May 2019 00:00 <a href="#">Edit Adj Rpt</a>	<b>S\$1,800.00</b> <a href="#">Edit Estimates</a>	<b>S\$1,800.00</b> <a href="#">View Rpt</a>		<b>Pending for Survey Report</b> <a href="#">Cancel Case</a>

Main

Reference

Claim Details

Documents

Show All

CLAIM SUBFOLDER DETAILS		[Created by adjuster]
Insured:	COMFORT TRANSPORTATION PTE LTD, Co. Reg. No.: -	
Main Claimant:	CITYCAB PTE LTD, Co. Reg. No.: 199502839G	
Vehicle Reg. No.:	SHA783Z	Date of Loss: 13/05/2019 22:00 - :59 [50 Months and 1 Days From LTA Reg Date (Man Yr)]
Claim Type:	TP / MCT19050340	Policy/Cover Note No.: MCOM0015
Vehicle Reg. No. (Insured):	SHA7323Y	Policy No. (Claimant): D-18088937MFSH
		Excess:
Repairer:	Ding Automotive Pte Ltd (SIN MING) BLK 10 #01-20 SIN MING, IND EST SEC C, 575645 Sin Ming - Tel:	
Handling Insurer:	India International Insurance Pte Ltd (HQ) - Tel: 63476100 ... [Handled by Sundari Nagarajan - 6347 6071]	
Claimant's Insurer:	MS First Capital Insurance Ltd (HQ) - Tel: 62222311	
Adjuster:	LKK Auto Consultants Pte Ltd (HQ) - Tel: 6256-3561 ... [Handled by MOHD TAUFIKH BIN HAMID] ... [Final Rpt due 31/05/2019]	

ASSOCIATED MAIL RECEIVED

[View All](#)

[Compose Case Mail](#)

- III\_SG (06/08/2019): Alert - Adj Mandate Approved (S\$2536.13) - SHA783Z - Claim Handler: Sundari Naga...
- III\_SG (25/07/2019): Alert - Adj Mandate Maintained - SHA783Z - Claim Handler: Sundari Nagarajan
- III\_SG (17/07/2019): Alert - Adj Mandate Approved (S\$0.00) - SHA783Z - Claim Handler: Sundari Nagaraj...

ALL ASSOCIATED TASKS

[View All](#)

[Search Tasks](#)














[Create New Task](#)

[Complete](#)

Due Date	Priority	Type	Task Group	Subject	Handler	Assigned By	Completed On	Created On	Done?
No results.									

## Claim Documents

\*SHA783Z (MCT19050340)  
[SHA7323Y]  
TP  
CITYCAB PTE LTD  
May 13 2019 10:00PM  
[COMFORT TRANSPORTATION PTE LTD]  
Ding Automotive Pte Ltd

Upload Documents			Upload Photos			Compose New Letter			View View in Browser		
Video									1 per page		<input checked="" type="checkbox"/>
No	Finalized On	India International Insurance Pte Ltd (HQ)						Thumbnail	Print		
1	05/08/19 17:41	Video - Accident-TP						 Load MP4			
Photos/Images									3 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
2	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
3	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
4	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
5	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
6	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
7	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
8	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
9	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
10	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
11	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
12	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
13	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
14	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
15	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
16	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
17	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
18	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
19	22/07/19 17:36	General View						 Load JPG	<input checked="" type="checkbox"/>		
Documentation									1 per page		<input checked="" type="checkbox"/>
No	Relabel/Reorder	LKK Auto Consultants Pte Ltd (HQ)						Thumbnail	Print		
1	22/05/19 14:33	EMAIL FROM III DD 22052019						 Load PDF			
2	22/05/19 14:33	TP GIA REPORT						 Load PDF			
3	23/05/19 20:16	TP ESTIMATE- MARKED						 Load PDF			
4	22/07/19 10:50	RENTAL RECEIPT						 Load PDF			
5	22/07/19 10:50	RENTAL MILEAGE						 Load PDF			
6	22/07/19 10:50	LTA SEARCH						 Load PDF			
7	22/07/19 10:50	LOD						 Load PDF			
8	23/08/19 09:02	WORKSHOP INVOICE						 Load PDF			
9	23/08/19 09:02	AUTHORISATION TO ACT FORM						 Load PDF			
10	23/08/19 09:02	DISCHARGE VOUCHER						 Load PDF			
No	Finalized On	India International Insurance Pte Ltd (HQ)						Thumbnail	Print		
1	23/05/19 08:57	Singapore Accident Statement						 Load PDF			

Documents Checklist

<b>DOCUMENTS CHECKLIST</b>	<a href="#">Reset</a>	<a href="#">Save</a>	<a href="#">Print</a>
There are no document checklists configured.			

<b>Our Checklist Remarks - LKK Auto Consultants Pte Ltd (HQ)</b>
<div></div>
<b>Show Remarks To:</b> <input type="checkbox"/> Handling Insurer
<small>Note: Remarks are private unless you show it to other parties.</small>

# LKK Auto Consultants Pte Ltd

(Co. Reg. No: 199607198R)

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

Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

## VEHICLE DAMAGE INSPECTION REPORT

Our File No: CC4/III19008976/T1WB3Q2

Date: 23/08/2019

### REFERENCE

Handling Insurer: India International Insurance Pte Ltd

Policy No: MCOM0015

Claimant Vehicle No: SHA783Z

Insured Vehicle No: SHA7323Y

Date of Loss: 13/05/2019

Nature of Claim: TP

Claim No: MCT19050340

### DESCRIPTION & IDENTIFICATION OF VEHICLE

Reg No: SHA783Z

Make &amp; Model: HYUNDAI I40, 1.7 D CRDi (A)

Engine No: D4FDDU371615

Reg. Date: 12/03/2015 (Man. Year: 2014)

Chassis No: KMHLB41UMFU066071

Colour: Yellow

Odometer: 531235 km

Engine Capacity: 1685 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:

### CONDITION OF TYRES

Front Tyre Size: 205/60 R16

Rear Tyre Size:

205/60 R16

Front Left Side: Triangle 6 mm

Rear Left Side:

Triangle 6 mm

Front Right Side: Triangle 6 mm

Rear Right Side:

Triangle 6 mm

The above values represent the remaining tyre treads depth

### COST OF CLAIMS

	Repairer's	Adjuster's	Difference	Diff %
Parts	3,026.64	1,360.78	1,665.86	55.04
Miscellaneous Items	0.00	0.00	0.00	
Labour	1,360.00	940.00	420.00	30.88
Paintwork Labour	0.00	0.00	0.00	
Towing	0.00	0.00	0.00	
<b>Calculated Gross Total (S\$)</b>	<b>4,386.64</b>	<b>2,300.78</b>	<b>2,085.86</b>	<b>47.55</b>
<b>Approved Total (Overridden) (S\$)</b>		<b>1,800.00</b>		
(S\$)	4,386.64	1,800.00	2,586.64	58.97
<b>+ GST 7.00/7.00% (S\$)</b>	<b>307.06</b>	<b>126.00</b>	<b>181.06</b>	<b>58.97</b>
<b>Nett Amount (S\$)</b>	<b>4,693.70</b>	<b>1,926.00</b>	<b>2,767.70</b>	<b>58.97</b>
<b>+ Loss of Use (4.0 x S\$40.00/day) (S\$)</b>		<b>160.00</b>		
<b>+ Car Rental (4.0 x S\$110.67/day) (S\$)</b>		<b>442.68</b>		
<b>+ Doc/Search Fee (S\$)</b>		<b>7.45</b>		
<b>Nett Liability (S\$)</b>		<b>2,536.13</b>		
<b>Global Sum Settlement (S\$)</b>		<b>2,500.00</b>		

### INSPECTION

Date of Assignment: 21/05/2019

Date Inspected: 22/05/2019 Inspected At: 31 CORPORATION ROAD  
Estimated Period of Repair: 3.0 days Repairer: Ding Auto Pte Ltd (HQ)

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**Adjuster:** MOHD TAUFIKH BIN HAMID

**Manager:** VIVIAN LAU PEI FENG

*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

<b>Reference</b>	
<b>Part Source:</b> MRM-SG	Version: 1.0 (Last Synchronised: 22 Jul 2019)
<b>Parts:</b> 143	HYUNDAI I40 1.7 D CRDi (A) (Catalogue:Merimen Singapore 1.0)
<b>Labour:</b> Repairer's	(Price-denominated Standard List)
<b>Print Code:</b>	(Unsubmitted, no print-code for SHA783Z)
<b>Validity:</b>	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
<b>Further Info:</b> Items/values not in reference catalogue are prefixed with an asterisk *.	

## Recommended Parts

No.	Qty	Part No.	Particulars	Condition	Repairer's	Amount
1	1		*FRONT BUMPER V2	Deformed	699.58 FL	*699.58 FL
2	1		*FRONT BUMPER RETAINER RH	Necessary	42.98 FL	*42.98 FL
3	1		*FRONT BUMPER RETAINER LH	Not Necessary	42.98 FL	*- FL
4	1		*HEAD LAMP RHS	Not Necessary	1,808.10 FL	*- FL
5	1		*FRONT FENDER RHS	Bent	623.86 FL	*623.86 FL
6	1		*FRONT FENDER INNER SHIELD RHS	Not Necessary	175.00 FL	*- FL
7	1		*FRONT WHEEL CAP RHS	Cut	265.80 FL	*265.80 FL
8	1		*SET FRONT BUMPER CLIP	Necessary	35.00 FS	*35.00 FS
9	1		*SET FRONT FENDER QTR GARNISH CLIP	Not Necessary	15.00 FS	*- FS
10	1		*SUNDRIES	Necessary	50.00 FS	*20.00 FS
					<b>Sub Total (S\$)</b>	<b>3,758.30 1,687.22</b>
					<b>- List Item Discount on L Items 20.00/20.00% (S\$)</b>	<b>731.66 326.44</b>
					<b>Total Parts (S\$)</b>	<b>3,026.64 1,360.78</b>

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

Report was unsubmitted during this print-out.

Recommended Miscellaneous Items

There are no new miscellaneous items selected.

Recommended Labour

No	Particulars	Lab.Type	Repairer's	Amount
<u>Labour Items</u>				
1	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	New	450.00	300.00
2	DIAGNOSTIC VEHICLE & RESETTING HEADLAMP ADJUSTMENT	New	250.00	150.00
3	CONDUCT 4 WHEEL ALIGNMENT	New	120.00	60.00
4	REMOVE & REFIT WHEEL CAP & CHECK UNDERCARRIAGE NECESSARY ADJUSTMENT	New	80.00	30.00
5	RESPRAY FRONT BUMPER	New	230.00	200.00
6	RESPRAY FRONT FENDER RHS	New	230.00	200.00
Gross Labour Cost (\$\$)			1,360.00	940.00

Report was unsubmitted during this print-out.

< END OF ESTIMATES >