

ASS. REC. BY:

REF:

CS/UOI19009073/Ksd30

Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Lew Jenny

of

UOI

Date/Time: 23/5/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 9863B

Insured:

GW 2489G

at Workshop m/s

Transcab

Tel:

62876666

of

No. 2 Amk. St. 63

Policy No:

DHOM110134891405

Claim No:

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 18/5/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

23/5/19 @ 2:11pm

Person Contacted:

Sunder

Vehicle IN/OUT

Date/Time	Action/Instruction
	Estimate ✓
	SHD 9863B - NBA/INC 18008050 /
	GW 2489G - X

D.O.A. 1/05/2018

ASS. REC. BY:

REF: 401

ASSIGNMENT

From:

Date:

23/5/19

Estimated Cost:

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

To Inspect Vehicle No:

SHD 9863B

at Workshop m/s

Transcab

of

No. 2 AMK st. 63

Insured:

Policy No.

Claims No.

Sum Insured:

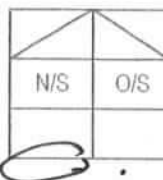
Excess:

(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:

03

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS ^{1 up}

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SHD 9863B

Yr Regn:

05 / 14

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

Truck / Trailer or

Make:

Perant Latitude

C.C

1995

Colour

M. White / Red

A/C:

Insured / Std / NI / NA

Sp. Reading

718174

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VF1 ABL 15 AUC 277396

Gen. Cond: ~~Good~~ / Fair / Poor / BurntSteering: ~~In order~~ / Jammed / Leaked / Burnt orBrake: ~~In order~~ / Jammed / Leaked / Burnt orModi: ~~Nil~~ / S/Rim / STD A/Rim or

Tyre Size:

F:

215/60R16

R:

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

TOYO / YOKO or

Gti.

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

18/5/19

D.O.I.

23/5/19

Survey held at

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

1) Rep @ 2750/- Confirm
(\$ 21,966.21 Red - 89%)

RECEIVED 30 MAY 2019

Date/Time, File Pass to?

30/05/19

1)

Typst

Date/Time, File Return to?

2)



Prel. Report



Final Report

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Report Format:

Lump Sum / L&C:

2.750/- HS

Survey Fee:

Transportation:

Photos

Others

TOTAL

14 x 25 =

250 + 350

60

13

673



MEMBER OF THE UOB GROUP

United Overseas Insurance Limited
3 Anson Road #28-01 Springleaf Tower
Singapore 079909
Tel: (65) 6222 7733
Fax: (65) 6327 3869 / 6327 3870
Email: ContactUs@uoi.com.sg
uoi.com.sg
Co. Reg. No. 197100152R

To :	Trans – Cab Services Pte Ltd Attn: Candy –Accident Department	Fax : 62571330
From :	Jenny Lew	Fax : 63273869
Date :	23.5.2019	Our ref: GW2489G (DHOM110134891405) Yr ref : SHD9863B

FACSIMILE MESSAGE

WITHOUT PREJUDICE

REQUEST FOR PRE-REPAIR SURVEY – SHD9863B
ACCIDENT INVOLVING GW2489G AND SHD9863B ON 18.5.2019

We refer to your email dated 23.5.2019.

Pursuant to the amended Pre-action Protocol for Non-Injury Motor Accident (NIMA), we enclose a list of our Surveyors, for your attention.

In this case we have proposed to appoint M/s LKK Auto Consultants Pte Ltd from our list, to conduct the pre-repair survey on without prejudice basis.

Please revert to the undersigned within **two (2) working days** whether you have any objections to the appointment of any of our Surveyors, failing which we shall proceed to carry out the survey of your client's vehicle by our appointed Surveyors.

Please forward us a copy of the estimated cost of repair, name and contact of your workshop

Please seek your client's instruction for the repair after the inspection has been completed and inform our surveyors to carry out a Post-Repair Inspection

We reserve all our rights in this matter.

Thank you.

Regards

Jenny Lew
Claims Dept

cc: LKK Auto Consultants Pte Ltd
Fax: 62564315
Attn : Shiau Chan

For your immediate attention.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3878K
Vehicle Details	
Vehicle No.:	SHD9863B
Vehicle to be Exported:	Yes
Intended Deregistration Date:	21 May 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2014
Engine No.:	M9R8839C001214
Chassis No.:	VF1ABL15AUC277396
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	09 May 2014
First Registration Date:	09 May 2014
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	08 May 2022
PARF Rebate Amount:	\$8,748.00
Intended COE Rebate Details	
COE Expiry Date:	08 May 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$60,414.00
COE Rebate Amount:	\$22,377.00
Total Rebate Amount:	\$31,125.00
Message	
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 21 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	21/05/2019 10:04
Date Of Accident	18/05/2019 22:25
Exact Location Of Accident	BLK 645 HOUGANG AVENUE 8 CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHD9863B
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	
Name of Driver	NYIU YAM
NRIC No	S1208394G
Date Of Birth	06/01/1956
Occupation	OUTDOOR
Date Of Driving Pass	23/08/1977
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90186488
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 621 ANG MO KIO AVENUE 9 #05-66
Postcode	560621
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?	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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KEBUN BARU NPP
Police Station Address	ROAD: 111 ANG MO KIO AVE 4 , POSTCODE: 560111 , 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/20190519/2094

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?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GW2489G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
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	NYIU YAM
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SHD9863B
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.

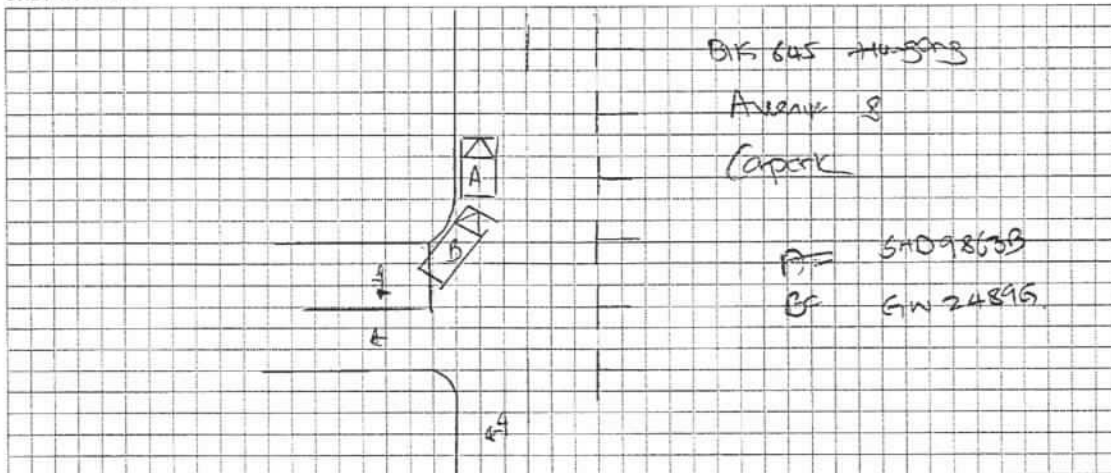
Policyholder's Signature
Date & Time:


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach police report

DECLARATION

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

Policyholder's Signature
 Date & Time:

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

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



**SINGAPORE
POLICE FORCE**



T/20190519/2094

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

1 of 4

Report No. T/20190519/2094

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2019 19:06		Vide Report No.:		Station Diary No.: 42	
Name of Informant: NYIU YAM					
Address: APT BLK 621 ANG MO KIO AVENUE 9 #05-66 SINGAPORE 560621					
ID Type / ID No.: NRIC NO / S1208394G		Contact No.: Home/Office: Mobile: 90186488			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 63	Date of Birth: 06/01/1956	Type of Informant: Driver		
Race: Chinese		Language: Chinese		Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: 3,4,5 Date of Expiry:			

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/05/2019 22:25	Type of Location: Car Park
Location: Along Road 1 HOUGANG AVENUE 8 BLK 645 HOUGANG AVE 8 CARPARK				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicles Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GW2489G	Lorry					0
SHD9863B	Car				Slightly Damaged	1

Details of Pedestrians Involved

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



**SINGAPORE
POLICE FORCE**



T/20190519/2094

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

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Report No. T/20190519/2094

CONTINUATION OF REPORT

Name	Unknown		ID No.	NIL
Related Vehicle	GW2489G (Lorry)		Contact No.	NIL
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	NYIU YAM		ID No.	S1208394G
Related Vehicle	SHD9863B (Car)		Contact No.	90186488
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	19/05/2019	Date Discharge	19/05/2019	
No. of Days granted Medical Leave	05	Degree of Injury	Slight	

Brief Details.

On 18/05/2019 at about 2225hrs, I was driving my taxi SHD9863B with a male passenger along Hougang Ave 8. When I was at Blk 645 Hougang Ave 8 carpark, I was looking for a place to alight the passenger therefore I was driving at a very slow speed.

While I was looking for a place to alight the passenger, my taxi was hit at the back by another vehicle. Immediately, I made a check with the passenger if he was injured and he said that he was not injured. Then I went to check the damages and saw that the lorry GW2489G had hit the rear bumper on the left side and I went to speak to the male Chinese driver who had came out of the lorry.

Initially, he offered to pay me S\$300/- however it was not enough for the repairs, I told him that the damages would require more than S\$500/- and the lorry driver told me that he is unable to pay that amount and asked me to make a claim from my insurance. I agreed and left after taking photos of the accident. The passenger paid and left after I took photos.

On 19/05/2019 at about 0800hrs, I woke up and felt pain on my shoulders, back and neck. I also felt numbness on all my limbs. I went to Mount Alvernia hospital and was given a 5 days MC. I wish to state that there is in-car camera installed in my taxi.

I am lodging this report for insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20190519/2094

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

3 of 4

Report No. T/20190519/2094

CONTINUATION OF REPORT

**SINGAPORE
POLICE FORCE**

T/20190519/2094

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

4 of 4

Report No. T/20190519/2094

CONTINUATION OF REPORT

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:

F /

Sgt 2 IZWAN BIN SANI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/05/2019 19:06

Officer In Charge Of Case:

TP / AEIT /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168

Trans-cab Auto Services Pte Ltd

AAD1905-153

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9863B*Not Authorised*
1/15mp @ 2750/

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer :

Date of Registration:

SHD 9863B

VF1ABL15AUC277396

RENAULT

LATITUDE

18.5.19

UNITED OVERSEAS INS

9/5/2014

PART**LIST**

1	1	BUMPER COVER REAR	\$	<i>Bumper</i> 1,108.46	✓
2	1	BUMPER LOWER REAR	\$	<i>Mod/br</i> 768.84	✓
3	1	BUMPER BRACKET CTR REAR	\$	<i>SL</i> 113.47	X
4	1	BUMPER BRACKET SIDE RH REAR	\$	<i>SL</i> 135.97	X
5	1	BUMPER RETAINER RH REAR	\$	<i>SL</i> 44.99	X
6	1	BUMPER REFLECTOR RH	\$	<i>SL</i> 43.61	X
7	1	BUMPER BRACKET SIDE LH REAR	\$	<i>DIS</i> 135.97	✓
8	1	BUMPER RETAINER LH REAR	\$	<i>SL</i> 44.99	X
9	1	BUMPER REFLECTOR LH	\$	<i>CM</i> 43.61	✓
10	1	BUMPER BEAM REAR	\$	<i>R</i> 777.52	} X
11	1	BUMPER BEAM BRACKET LH REAR	\$	<i>R</i> 225.95	
12	1	BUMPER BEAM BRACKET RH REAR	\$	<i>R</i> 225.95	
13	1	OUTER PANEL REAR (End Panel)	\$	<i>R</i> 1,471.77	
14	1	OUTER PANEL REAR (End Panel)TRIM	\$	<i>SL</i> 404.56	
15	1	TAILLAMP RH	\$	<i>R</i> 552.55	} X
16	1	TAILLAMP PANEL RH	\$	<i>R</i> 986.70	
17	1	TAILLAMP LH	\$	<i>CM</i> 552.55	
18	1	TAILLAMP PANEL LH	\$	<i>R</i> 986.70	
19	1	BOOT REAR	\$	<i>R</i> 2,872.68	
20	1	BOOT FINISHER	\$	<i>SL</i> 470.06	} X
21	1	BOOT WHEATERSTRIP	\$	<i>SL</i> 323.05	
22	1	BOOT REFLECTOR LAMP LH	\$	<i>SL</i> 493.35	
23	1	BOOT REFLECTOR LAMP RH	\$	<i>SL</i> 493.35	
24	1	BOOT BADGE 'RENAULT'	\$	<i>na</i> 225.36	
25	1	BOOT BADGE	\$	<i>na</i> 225.36	
26	1	BOOT STRUT LH	\$	<i>SL</i> 276.08	
27	1	BOOT STRUT RH	\$	<i>SL</i> 276.08	
28	1	BOOT HINGE LH	\$	<i>R</i> 367.84	
29	1	BOOT HINGE RH	\$	<i>R</i> 367.84	

Trans-cab Auto Services Pte Ltd

AAD1905-153

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9863B

30	1	BOOT INNER TRIM	\$	586.45	X
31	1	BOOT SWITCH	\$	168.13	X
32	1	BOOT LOCK	\$	202.67	X
33	1	BOOT LOCK CATCH	\$	74.40	X
TOTAL			\$	16,046.87	
10%			\$	1,604.69	
			\$	14,442.19	

Special Nett

1	1SET	PARKING AID	\$	700.00	X
2	1SET	REAR BUMPER CLIP	\$	66.00	✓
3	1SET	BUMPER BRACKET CTR CLIP	\$	33.00	✓
4	1SET	BUMPER BRACKET SIDE CLIP RH RR	\$	10.00	X
5	1SET	BUMPER RETAINER RH CLIP RR	\$	20.00	X
6	1SET	BUMPER BRACKET SIDE CLIP LH RR	\$	10.00	X
7	1SET	BUMPER RETAINER CLIP LH RR	\$	20.00	X
8	1SET	BUMPER LOWER REAR RIVET	\$	22.00	X
9	1SET	BUMPER LOWER REAR CLIP	\$	66.00	✓
10	1	BOOT STICKER "Trans-cab"	\$	30.00	} X
11	1	BOOT STICKER "6555-3333"	\$	30.00	
12	1	EXHAUST MOUNTING REAR	\$	17.82	
13	2	REAR WINDSCREEN SEALANT	\$	80.00	
14	1	WINDSCREEN MOULDING	\$	100.00	
15	1	REAR WINDSCREEN INNER SPONGE SEAL	\$	100.00	} X
16	1	BOOT INNER TRIM CLIP	\$	45.00	
17	1SET	BOOT FINISHER CLIP	\$	24.20	} X
18	1	TAILLAMP CLIP LH	\$	5.00	
19	1	TAILLAMP CLIP RH	\$	5.00	X
TOTAL			\$	1,384.02	

TOTAL PARTS	\$	15,826.21
--------------------	-----------	------------------

LABOUR

To Check Electrical Lighting Concerned.	\$	170.00	201
To transfer of tire, rim and on wheel balancing.	\$	170.00	X
To Rust-Proofing Of The Affected Areas.	\$	170.00	X

Trans-cab Auto Services Pte Ltd

AAD1905-153

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No. : 6287 6666 Fax No. : 6257 1330

CO./GST Reg. No. 201019626G

SHD 9863B

Putty And Spray Painting Of The Affected Portion.	\$	3,000.00	4801
To remove and refit interior fittings, trimings, garnish, fittings and other, to enable repair.	\$	nn 380.00	X
To transfer of bootlid fittings, attachments and perform water seepage test.	\$	nn 170.00	X
To reinstall rear bumper parking sensor.	\$	170.00	601
Panel Beating, Knocking And Straightening The Necessary Portion, Remove And Renewal Of Parts, Adjust And Realign The Same	\$	3,000.00	4001
To repair and realign rear exhaust pipe.	\$	nn 170.00	X
To drop rear exhaust box, renew the same, to repair and realign centre exhaust pipe.	\$	4 170.00	X
To transfer of rear end panel fittings, attachment and perform water seepage test.	\$	4 170.00	X
To transfer of rear windscreen fittings and conduct water seepage test.	\$	4 170.00	X
To check steering geometry and computer wheel alignment	\$	4 220.00	X
To transfer of rear fender fittings, attachment and perform water seepage test.	\$	4 380.00	X
To transfer of rear bumper fittings, attachment and perform water seepage test.	\$	4 380.00	X

TOTAL \$ **8,890.00****Over All Total** \$ **24,716.21****LUMP SUM (REPAIR DAY)****10 DAYS****3 days**

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 report(s) must be resurveyed
- is subject to final approval from Insurance Company

Acknowledged by Repairer:
Signature:
Date:




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

Affiliated to Federation Internationale Des Experts En Automobile				
UNITED OVERSEAS INSURANCE LTD			Ref : CS/UOI19009073/Ksd3e2	
3 ANSON ROAD #28-01 SPRINGLEAF TOWER SINGAPORE 079909			Date : 03-06-2019	
			Code : UOI2	
1. Policy Particulars :- THIRD PARTY CLAIM				
Insured Veh.	GW 2489G	Veh. Inspected	SHD 9863B	
Policy No.	DHOM110134891405	Coverage (\$)	0.00	
Claim No.		Excess (\$)	0.00	
Assign From	JENNY LEW	Assign Date	23/05/2019	
2. Vehicle Particulars & Condition				
Make & Model	RENAULT LATITUDE (A)	c.c	1995	
Engine No.	HIDDEN	Year of Reg.	2014	
Chassis No.	VF1ABL15AUC277396	Colour	METALLIC WHITE / RED	
Odometer	718174	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	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	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE REAR PORTION. DAMAGES SEE DETAILS.				
5. General Information				
Accident Date	18/05/2019	Inspection Date	23/05/2019	
Survey held at	TRANS-CAB AUTO SERVICES PTE LTD NO.2 ANG MO KIO ST 63 SINGAPORE 569111			
5a. Remarks				
A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		



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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 9863B

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	BUMPER COVER REAR	BUCKLED / CRACKED	1,108.46	1,108.46
1	BUMPER LOWER REAR	DENTED / CUT	768.84	768.84
1	BUMPER BRACKET CTR REAR	SERVICEABLE	113.47	-
1	BUMPER BRACKET SIDE RH REAR	SERVICEABLE	135.97	-
1	BUMPER RETAINER RH REAR	SERVICEABLE	44.99	-
1	BUMPER REFLECTOR RH	SERVICEABLE	43.61	-
1	BUMPER BRACKET SIDE LH REAR	DISTORTED	135.97	135.97
1	BUMPER RETAINER LH REAR	SERVICEABLE	44.99	-
1	BUMPER REFLECTOR LH	CRACKED	43.61	43.61
1	BUMPER BEAM REAR	TO REPAIR SEE LABOUR	777.52	-
1	BUMPER BEAM BRACKET LH REAR	TO REPAIR SEE LABOUR	225.95	-
1	BUMPER BEAM BRACKET RH REAR	TO REPAIR SEE LABOUR	225.95	-
1	OUTER PANEL REAR (END PANEL)	TO REPAIR SEE LABOUR	1,471.77	-
1	OUTER PANEL REAR (END PANEL) TRIM	SERVICEABLE	404.56	-
1	TAILLAMP RH	SERVICEABLE	552.55	-
1	TAILLAMP PANEL RH	TO REPAIR SEE LABOUR	986.70	-
1	TAILLAMP LH	CRACKED	552.55	552.55
1	TAILLAMP PANEL LH	TO REPAIR SEE LABOUR	986.70	-
1	BOOT REAR	TO REPAIR SEE LABOUR	2,872.68	-
1	BOOT FINISHER	SERVICEABLE	470.06	-
1	BOOT WEATHERSTRIP	SERVICEABLE	323.05	-
1	BOOT REFLECTOR LAMP LH	SERVICEABLE	493.35	-
1	BOOT REFLECTOR LAMP RH	SERVICEABLE	493.35	-
1	BOOT BADGE 'RENAULT'	NOT NECESSARY	225.36	-
1	BOOT BADGE	NOT NECESSARY	225.36	-
1	BOOT STRUT LH	SERVICEABLE	276.08	-
1	BOOT STRUT RH	SERVICEABLE	276.08	-
1	BOOT HINGE LH	TO REPAIR SEE LABOUR	367.84	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	BOOT HINGE RH	TO REPAIR SEE LABOUR	367.84	-
1	BOOT INNER TRIM	SERVICEABLE	586.45	-
1	BOOT SWITCH	SERVICEABLE	168.13	-
1	BOOT LOCK	TO REPAIR SEE LABOUR	202.67	-
1	BOOT LOCK CATCH	TO REPAIR SEE LABOUR	74.40	-
	LESS 10% DISCOUNT		-1,604.69	-260.94
			14,442.17	2,348.49
	<u>SPECIAL NETT ITEMS</u>			
1	SET PARKING AID (SN)	SERVICEABLE	700.00	-
1	SET REAR BUMPER CLIP (SN)	NECESSARY	66.00	66.00
1	SET BUMPER BRACKET CTR CLIP (SN)	NECESSARY	33.00	33.00
1	SET BUMPER BRACKET SIDE CLIP RH RR (SN)	NOT NECESSARY	10.00	-
1	SET BUMPER RETAINER RH CLIP RR (SN)	NOT NECESSARY	20.00	-
1	SET BUMPER BRACKET SIDE CLIP LH RR (SN)	NOT NECESSARY	10.00	-
1	SET BUMPER RETAINER CLIP LH RR (SN)	NOT NECESSARY	20.00	-
1	SET BUMPER LOWER REAR RIVET (SN)	NOT NECESSARY	22.00	-
1	SET BUMPER LOWER REAR CLIP (SN)	NECESSARY	66.00	66.00
1	BOOT STICKER "TRANS-CAB" (SN)	NOT NECESSARY	30.00	-
1	BOOT STICKER "6555-3333" (SN)	NOT NECESSARY	30.00	-
1	EXHAUST MOUNTING REAR (SN)	NOT NECESSARY	17.82	-
2	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	80.00	-
1	WINDSCREEN MOULDING (SN)	NOT NECESSARY	100.00	-
1	REAR WINDSCREEN INNER SPONGE SEAL (SN)	NOT NECESSARY	100.00	-
1	BOOT INNER TRIM CLIP (SN)	NOT NECESSARY	45.00	-
1	SET BOOT FINISHER CLIP (SN)	NOT NECESSARY	24.20	-
1	TAILLAMP CLIP LH (SN)	NECESSARY	5.00	5.00
1	TAILLAMP CLIP RH (SN)	NOT NECESSARY	5.00	-
			1,384.02	170.00
	<u>LABOUR</u>			
	TO CHECK ELECTRICAL LIGHTING CONCERNED.		170.00	20.00
	TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	-
	TO RUST-PROOFING OF THE AFFECTED AREAS.	NOT NECESSARY	170.00	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		3,000.00	440.00
	TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.	NOT NECESSARY	380.00	-
	TO TRANSFER OF BOOTLID FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
	TO REINSTALL REAR BUMPER PARKING SENSOR.		170.00	60.00
	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF BUMPER BEAM REAR, BUMPER BEAM BRACKET LH REAR, BUMPER BEAM BRACKET RH REAR, OUTER PANEL REAR (END PANEL), TAILLAMP PANEL RH, TAILLAMP PANEL LH, BOOT REAR, BOOT HINGE LH, BOOT HINGE RH, BOOT LOCK AND BOOT LOCK CATCH.		3,000.00	400.00
	TO REPAIR AND REALIGN REAR EXHAUST PIPE.	NOT NECESSARY	170.00	-
	TO DROP REAR EXHAUST BOX, RENEW THE SAME, TO REPAIR AND REALIGN CENTRE EXHAUST PIPE.	NOT NECESSARY	170.00	-
	TO TRANSFER OF REAR END PANEL FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
	TO TRANSFER OF REAR WINDSCREEN FITTINGS AND CONDUCT WATER SEEPAGE TEST.	NOT NECESSARY	170.00	-
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	-
	TO TRANSFER OF REAR FENDER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
	TO TRANSFER OF REAR BUMPER FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	380.00	-
			8,890.00	920.00
GRAND TOTAL			24,716.19	3,438.49
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				2,750.00

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KONG SENG CHEONG

Licensed Appraiser

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