Surveyor	DOI: ASSIGNMENT	Date Time 11/6/2019
		Registered in Merimon:
Pre-assign/CCU/FTE	m K	5 9 m 51 Q 6 P
Insured Vehicle No.	SI M RATED Police No	
Name of Insured : Thy (F-VI-)	Policy le	
Insured Tel No.	HP: Make / M	
Excess Sec II :SS Is driver the owner? (YES (NO))	D.O.A: The Place of	Accident:
If NO, Driver Name / Age Daniel DW	reven Reviveren organ	REPORT YES NO ; TP GIA REPORT: YO / NO
Driver Tel No. :	(V/L: VES NO) Insured I	
SHC 3718 H	→	
	e. hiebe	INSRS:
WSP: (DLesson wsp.		WSP:
Tel: Linbility: Linbil	ity: Tel:	ty: Tel; Liability:
RMKS: RMK	PLE 3-71	N/ -W
Date/ Time		
1463 184 ED LEC	130 (000 4 KALES : MB. 413) 1	
SPH BLINK- X		Non-Reporting ltr (1st): Non-Reporting ltr (2nd):
. 11		Non-Reporting br (Final) Notification br (if non-pickup)
116 BINR . sout out	let letter.	Call Of July #12/19
ratelia (m. cus)	.,	After call ltr to OI:
19/5/19 - 01 GVAIN	SC .	Documentation Check List: Handler Typist Notification ltr (if non-pickup)
26819 - Fel soul	i send DS-for	After call lir to OI:
1	2 2	Authorisation To Act:
29/8/19 - Pile pass to	MK to close.	Release Voucher:
		Final Repair Bill:
		Towing Invoice
		LTA/GIA:
		Medical Bill:
		PIR: Michigan Reject Instruction:
		LOD
		Payment Breakdown Form:
ELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:
VALIZATION Date/Time:	Confirm with	Others: Confirm by:
nair Cost: S\$ (days) Reduction: %	Email Call
NAL SETTLEMENT Date/Time: 26 8 9	Confirm with WILLAW	Formi Call
al Liability % (Agreed	I / Agested) BOLA S/N No.: 27-	If NO or B 28, Ass. Lia:
pair Cost: What SS 1127.50 is of Rental (LOR): SS 226.68	2-5 days) XK 110.67	
s of Use (LOU): S\$ (\$	- days)	
s of Income (LOI): SS (25 W (\$50 s	2.5 days)	CONTRACTOR OF THE PROPERTY OF
-1 100	LOR + LOI [Tick only one]	GUAL AL
VLTA Search SS 7. 40 dical: SS 7		1) Claim status: Normal/Reject/Private Settle
bursement: S\$ -	(e.g. Tow/ Independent)	2) Report Format:
tal Cost SS 572.67		3) Survey fee; #75vW
AL PAYMENT Date/Time:	Global Sum SS: \530.00 Confirm with:	Entail
	Name 1: Confutblight Ex	ancount Pletta (SGIND
sec 1: SS \ 570-117		THIS SALE OF THE PERSON OF THE
ce 1: SS \5?υ-ω c. 1 (Sinite if N.A.) S1	Mana li	3

AS	SIGNMENT
From Date:	Veh No: SHC 3718 H Yr Regn: 2 14
EstimatelCost	Type: M.Car / M.Cycle / Bus / Van / Lorry / Tot / Prime Mover /
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
To insped Vehicle No:	Make: Whit Z80 00 1687 Colour Ble A/C: Insulad/Std/NI/NA
at Workstop m/s	Colour Ble A/C: Insulad/Std/NI/NA
PACE AND ADDRESS OF THE PACE A	Sp.Reading 3 // 96% T/Radio: Inst#ed / Std / NI / NA
1100 0000	Eng/No:
Insured:	CINO: KMHLBRIUMEHOS 6299
Policy No.	Gen. Cond: Good / Gr / Poor / Burnt
Sum Insured: Excess:	Steering: Inorper / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nii / S/Rim / STD &Rim or
1900	Tyre Size; F: 205/60R16
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO I YOKO OF West US
Ball or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 2 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 7 mm L/Bal. 7 mm
Est Repairs: A. days Res.: Yes or No	D.O.A. 9/6/19 D.O.I. 11/6/12
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at (PAE (Loyens)
	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / 0	12
Drate:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	4.4
111 10 10 10 10 10	AxA
1/2 # 1020-M CB	00 4 701. 40 4029
× ×	
	/ E.
DateTime, File Pass to? : Prell. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add	Fee: : Site Insp (\$)8+R8Si
00000	(Interview (S.) Page
	The second secon



Tean:

ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO 305302315

RESE

COMFORT TRANSPORTATION PTE LTD

7010045

383 SIN MING DRIVE

Singapore SINGAPORE 575717

65508755

SHC3718H MAKE: HYUNDAI E ... MODEL. I - 4010.06,2019 14:35 VR OF MANU 07.08.2014

COMPLETION DATE/TIME KMHLB41UMEU056299

CUNT CARD NO.

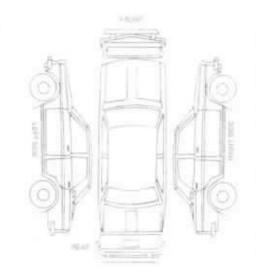
JOB DESCRIPTION

Accident Date: 09.06,2019 NATURE: 3P 09.06.2019

S/NO

LABOR CODE

DESCRIPTION



DKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

rledgement Slip

SHC3718H

LKE

Vehicle No.

Ect Ples

SHC3718H

if Service Advisor

Signature/Date

Name of Service Advisor

Dute

sturned to Service Reception upon collection

To be kept by Security Goald

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHC 3718H

MAKE :

MODEL : HYUNDAI i40

DATE 10/6/2019 17:03

AXA

ty	Parts Description/ Labour	Type	Unit Price	1	Mount
	Rear Bumper			S	553.00
	Rear Bumper Clip 10 pcs			5	22.00
	Rear Bumper Under Cover			s	228.00
	rear bumper critical cover				
	SUB TOTAL			S	803.00
	LESS 20%			S	160.60
	DISCOUNTED TOTAL			S	642.40
	Rear Bumper Rubber Mat			5	50.00
	Rear Bumper Advertisement Logo			S	50.00
	Rear Fender Advertisement Logo (LH/RH)		s 100.00	S	200.00
				\$	300.00
	Labour Charge				2
	Panel Beating			s	400.00
	Spray Painting Charge			S	
	Wiring Charge			5	300:00
	Remove/Refix Reverse Sensor				30,00
	Remove/Renx Reverse Sensor			\$	80.00
	TOTAL LABOUR			s	810.00
	ESTIMATE TOTAL			S	1,752.40
	Kehine (1816) 11/6/19 1110h 2lys				\
	11/6/m 1110h		TO POSTA		
	2631			S-10	= \
	4/5	-		1051	The state of
	Alle Ryngh	1:	100 mm		
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		\	200		
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be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMFORTDELGRO ENGINEERING

Dur J	ob Ref	No _	- 50	5302315				
Date		Ε,	1	9.06.19			59 Loys	DelGro Engineering Pte Lti ang Drive Singapore 50696
INA	LIZAT	ION FO	RM				Fax 60	46 8156
o				LKK			Fax:	
ttn	: M	tr.	К	ALVIN ANG				
/ehic	ie Reg	No.	SHC371	18H	CTPL			09.06.19
hes	urvey	and esti	mates of the	repairs of the	above-ment	ioned vehicle a	re as follows:-	
2	The	repair job	shall bill to:			AXA	-	SFH6111K
	The	finalized	amount shal	l be:				
	(a)	Spare	Parts after L	ist discount				
	(b)	Morra	r Charges					
				Part Repair (Cost			
				ON THE PROPERTY OF				
	(c.)			if applicable)		2011		** 050 00
		Total for Lumpsum repair cost after Less: Final Lumpsum Repair cost			ter Less:	20%		\$1,050.00 \$1,050.00
li.	Estin	nated no	rmal period f	or repairs:	_	2w	rking days.	
					Correct and		O TO STATE OF THE PARTY OF THE	ply from you within
	We s		at the above		Correct and		O TO STATE OF THE PARTY OF THE	ply from you within
4.	We s	shall tre orking d	at the above	e amount as	Correct and	d Confirmed if	O TO STATE OF THE PARTY OF THE	
4.	We s	shall tre orking d	at the above ays	e amount as	Correct and	d Confirmed if	there is no re	
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4.	We s	shall tre orking d nk you fo	at the above ays	e amount as	Correct and	d Confirmed if W	there is no re e confirm the es alized amount	
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	We s 7 wo Than Sign Nam	shall tre orking d nk you fo nature :	at the above ays or your assist	tance.	Correct and	d Confirmed if	e confirm the es alized amount gnature :	
	We s 7 wo Than Sign Nam Tel	shall tre orking d nk you fo nature :	at the above ays or your assist LIM KWOK 62148316	tance.	Correct and	d Confirmed if	e confirm the es alized amount	
	We s 7 wo Than Sign Nam	shall tre orking d nk you fo nature :	at the above ays or your assist	tance.	Correct and	d Confirmed if	e confirm the es alized amount gnature :	
3. 4. 5.	We so 7 wo Than Sign Nam Tel Fax	shall tre orking d nk you fo nature :	at the above ays or your assist LIM KWOK 62148316 65468156	tance.	Correct and	d Confirmed if	e confirm the es alized amount gnature :	
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For I	We so 7 wo Than Sign Nam Tel Fax Officia	shall tre orking d nk you fo	at the above ays or your assist LIM KWOK 62148316 65468156 nly	tance.		d Confirmed if	e confirm the esalized amount gnature :	klic 20/6/19
For I	We s 7 wo Than Sign Nam Tel Fax Officia	shall tre orking d nk you for nature:	LIM KWOK 62148316 65468156	tance.		d Confirmed if W fin Si No Di Document Attached Yes or No	e confirm the esalized amount gnature :	klic 20/6/19
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COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO: SHC 3718H

MAKE

DATE 10/6/2019 17:03

DEL	: HYUNDAI i40	Type	Unit Price	Aı	nount	
Qty	Parts Description/ Labour	1/10		S	553.00	
	Real Bumper			S	22.00	
	Rear Bumper Clip 10 pcs Rear Bumper Under Cover			S	228.00	
	-50			5	803.00	
	SUB TOTAL			5	160.60	
	LESS 20%			5	642.40	1
	DISCOUNTED TOTAL			,	012-10	
					50.00	
	Rear Bumper Rubber Mat			S	50.00	
	Rear Bumper Advertisement Logo	L	200000	S	50.00	
	Rear Fender Advertisement Logo (LH/RH)		\$ 100.00	S	200.00	1
				S	300.00	
	Labour Charge				200	1
				5	400:00	
	Panel Beating			S	300.00	7
	Spray Painting Charge			\$	30,00	
	Wiring Charge Remove/Refix Reverse Sensor			S	80.00	-
	TOTAL LABOUR	2		5	810.00)
	ESTIMATE TOTAL			\$	1,752.40)
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be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

Hsiao Tong (LKKAuto)

From:

Hsiao Tong (LKKAuto)

Sent:

Thursday, 18 July 2019 9:21 AM

To:

Ravi Rajoo

Subject:

RE: ACCIDENT INVOLVING SFH 6111K(AXA) AND SHC 3718H ALONG/AT SLIP RD

FROM CMMWTH AVE WEST TOWARDS CLEMENTI AVEZ ON 09/06/2019

Hi Mr Ravindran.

Received with thanks.

We will proceed to resolve the matter at our best.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Ravi Rajoo <ravirajoo@ymail.com> Sent: Tuesday, 16 July 2019 11:33 AM

To: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Subject: Re: ACCIDENT INVOLVING SFH 6111K(AXA) AND SHC 3718H ALONG/AT SLIP RD FROM CMMWTH AVE WEST

TOWARDS CLEMENTI AVE2 ON 09/06/2019

Hi Hsiao Tong,

after the last time you had contacted me, I had gone to Borneo Motors and reported the accident (see attached). Borneo Motors should have the photo's also. Subsequently, I received a letter from the Traffic Police requesting we make a police report, and that was done also - see attached.

I understand my NCD will be affected because of this claim. Please call me at 96743634 if there's anything else I need to do.

Thanks

Ravindran Rajoo

On Wednesday, July 10, 2019, 2:04:51 PM GMT+8, Hsiao Tong (LKKAuto) < chewht@lkkauto.com > wrote:

10 JULY 2019

MR RAVINDRAN S/O M RAJOO / MR DANIEL DHARSHAN RAVINDRAN

Dear Sir/ Mdm

OUR REF

: CC4/ASM19010286/K1pa3// S9M01Q6P

YOUR REF : SFH 6111K

ACCIDENT INVOLVING SFH 6111K(AXA) AND SHC 3718H ALONG/AT SLIP RD FROM CMMWTH AVE WEST TOWARDS CLEMENTI AVE2 ON 09/06/2019

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a third party claim(s) from COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SHC 3718H against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as it is a head-to-rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. You intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 7 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sq or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact as at 6742 3197 or chewht@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

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





T/20190629/2068

1 of 3

Report No. T/20190629/2068

Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2019 13:00			Vide Report No.:	Station Diary No. 64		
Informa	nt's Partic	ulars				
Name of Informant: DANIEL DHARSHAN RAVINDRAN			Address: APT BLK 336 CLEMENTI AVENUE 2 #04-32 SINGAPORE 120336			
ID Type / ID No.: NRIC NO / T0019566E			Contact No.: Home/Office: Mobile: 94517732			
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Age: Date of Birth: Male 19 05/06/2000			Type of Informant: Driver			
Race: Indian Occupation: Student			Language: English	Institution / School Name:		
			Driving Licence Informat Class: 3A	ion: Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/06/2019 23:1:	Type of Location: Y-Junction
COMMONWE CLEMENTI A Commonwea	oad 1 and Road 2 EALTH AVENUE W VENUE 2 Ith Avenue West tow	vards Ghim Moh		
Weather: Roa Clear Dry		Road Surface:		Road Speed Limit:
Clear		Lat y		
Clear Traffic Flow: Dual Carriage	Way	Traffic Control: Pedestrian Cross	ing	Traffic Volume: Moderate

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SFH8111K	Car	TOYOTA	Corolla Altis	White	Slightly Damaged	0
SHC3718H	Car	HYUNDAI	140	Blue	Slightly Damaged	1

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





Report No. T/20190629/2068

Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

CONTINUATION OF REPORT

Name	DANIEL DHARSHAN RAVINDRAN		ID No		T0019566E		
Related Vehicle	SFH6111K (Car)			Conta	ct No.	94517732	
Hospital/Clinic	NIL		E.		Class Drivin Licens Expin	9	Class: 3A Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL		
No. of Days granted Medical Leave		NIL	Degree o	f Injury	NIL		
Driver				可用前			
Name	TAY BAK SONG			ID No		S1463687J	
Related Vehicle	SHC3718H (Car)			Conta	ct No.	NIL	
Hospital/Clinic	NIL			Class		Class: 3,4,5 Date of Expiry: NIL	

Licence & Expiry Date arge NIL

Date Discharge

Degree of Injury | NIL

Brief Details.

Date Treatment | NII

No. of Days granted Medical Leave

On the 09/06/2019 at about 2315hrs, I was driving my father's car with the registration plate number. SFH6111K at along Commonwealth Ave West as I was going home. As I reach the slip road of Commonwealth Ave West turning into Clementi Avenue 2. I had slowed down and whilst I was slowing down, I glanced over my right shoulder for my any oncoming cars towards Clementi Avenue 2.

NIL

When I was slowing down and looking right, I accidently bumped into the rear bumper of the taxi with the registration plate number, SHC3718H that was right in front of me. When I bumped on to the taxi, the taxi had already stopped in the slip road.

When the accident happened, I could not see any visible damages to the rear bumper of the said taxi and also the front bumper of car, SFH6111K. I also wished to further add that no one was injured when the minor accident occurred.

On the 28/06/2019 at about 1445hrs, I received a phone call from my father informing me that I need to lodge a report on the accident that I had encountered with a taxi, SHC3718H. My father then sent me the image from the letter from Traffic Police that I am needed to lodge a traffic accident report as the taxi driver had injured himself.





Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

CONTINUATION OF REPORT

3 of 3

Report No. T/20190629/2068

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: D / Sgt 3 JASMI BIN JUMA'AT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/06/2019 13:00
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
NP168	N 37
Contact No.: 65476436 Authentication Standard S	N 37



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Haffler Carey W18 00 Singapore 048580 Tel (65) 4224 0010 Fax (65) 6224 0020

Operating Hours: Monday to Friday, 09:00 - 17:00 OTH: SHESSCOOKS / GST Reg. He.: 51000012775

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

			ADDEN	DUM	
(A)	PARTICULARS OF PERS	SONMAKINGT	THEAMENDIMEN	VTS:	
	Original Report No :_	mc0 6 190	FONT	Vehicle Registration No:	546 376 H
	Name(asshownin NRIC):	Tay B	ak Song	NRIC/FIN/PassportNo :	
	(*Vehicle Driver/Vehi				
	Address :_				Singapore()
	Contact (Tel) :_			Mobile No. :	
	Email Address :				
	Date of Accident :	9161	19	Time of Accident :	3057
			weith A		
		First	Capital	Insurance Lim	ited
	madiance company.			(ws	
	make the following an		paile	reset	
	-				
				91	

Policyholder / Driver's Signature Date 1416/19





Report No. T/20190611/2010

Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/06/2019 03:33			Vide Report No.:	Station Diary No.: 24	
Informa	nt's Partic	ulars			
Name of Informant: TAY BAK SONG			Address: APT BLK 342 CLEMENTI AVENUE 5 #04-176 SINGAPORE 120342		
ID Type / ID No.: NRIC NO / S1463687J			Contact No.: Home/Office: Mobile: 97587850 97587		
National SINGAP	ity: ORE CITIZ	'EN	Email:		
Sex: Male	Age: 57	Date of Birth: 10/09/1961	Type of Informant: Driver		
Race: Chinese			Language: Institution / School Name English		
Occupat			Driving Licence Information	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/06/2019 23:05	Type of Location Y-Junction
CLEMENTI A	Traveling Toward EALTH AVENUE W VENUE 2 Inue 2 towards Cler	EST		
Weather: R		Road Surface: Dry	R	Road Speed Limit:
Traffic Flow:		Traffic Control: Pedestrian Cross	50 II/A	raffic Volume: Noderate
11.00		d To Rear	а	inyone conveyed by imbulance:

Details of V	ehicle Invo	lved		AND DESCRIPTIONS	CONTRACTOR OF	ALCOHOLD BUILDING
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SFH6111K	Car	TOYOTA	Altis	White	Slightly Damaged	0
SHC3718H	Car	HYUNDAI	i40	Blue	Slightly Damaged	1

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





Report No. T/20190611/2010

Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

CONTINUATION OF REPORT

Driver						
Name	DANIEL DHARMASHAN RAVINDRAN			ID No	2	T0019566E
Related Vehicle	SFH6111K (Car)			Conta	ct No.	NIL
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: 3A Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	charge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	
Driver						
Name	TAY BAK SONG			ID No	Š.	S1463687J
Related Vehicle	SHC3718H (Car)		Conta	ct No.	97587850	
Hospital/Clinic	CHANGI GENERAL	L	Class Drivin Licend Expiry	g	Class: 3,4,5 Date of Expiry: NIL	
Date Treatment	10/06/2019		Date Disc	charge	10/06	3/2019
No. of Days gran	ted Medical Leave	NIL	Degree o		Sligh	

Brief Details.

On the 09/06/2019 at about 2300hrs, I was driving along Commonwealth Avenue West towards Ghim Moh. When I reach near the junction of Commonwealth Avenue West, I keep left before filtering into Clementi Avenue 2 towards Clementi Road. When I reached the give way line, I stopped my vehicle, SHC3718H (Blue Hyundai i40 Comfort Taxi) to look out for incoming vehicles when suddenly a White Colour Toyota Corolla Altis, SFH6111K hit my taxi from the rear while I was stationary.

We then got out of individual vehicle and we checked both of vehicle and exchange our particulars.

On the 10/06/2019 at about 1435hrs, I went to lodge a GIA report with Comfort Delgro Engineering after which I told them I need to go for a medical check-up as I have pain on my right shoulder.

On the 10/06/2019 at about 2000hrs, I went to Changi General Hospital for a medical check-up and got 3 days of medical leave for neck and shoulder strain.





Report No. T/20190611/2010

Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

CONTINUATION OF REPORT

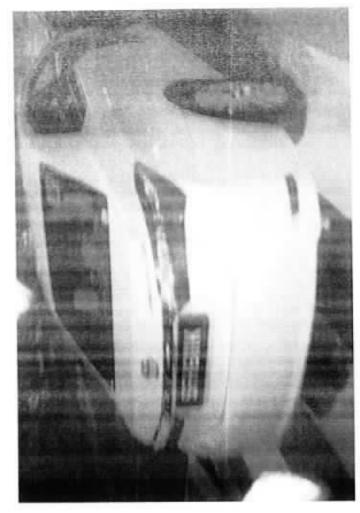
Sketch Plan

Informant is not able to provide sketch plan

SIGNATURE

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: D /	Signature Of Informant:
Sgt 3 JASMI BIN JUMA'AT	all
Signature Of Interpreter:	Date/Time:
Not applicable	11/06/2019 03:33
Officer In Charge Of Case:	Classification Of Case:
TP/AEIT/	
Sr Staff Sgt ONG YONG HOCK	
Contact No.: 65476436	
Authentealfon Stamp	
NF 168	







Hsiao Tong (LKKAuto)

From:

William Tan Thoo Seng <williamtan@cdge.com.sg>

Sent:

Monday, 5 August 2019 1:53 PM

To:

Hsiao Tong (LKKAuto)

Subject:

Re: Your Ref: T 0619/ SHC3718H/ WT(st) *Our Ref: CC4/ASM19010286/K1pa3 [ACCIDENT INVOLVING SFH 6111K(AXA) & SHC 3718H ON 09/06/2019]

Without Prejudice.

Dear Hsiao Tong

We accept your global offer. Kindly forward your D.V.

Thank you.

Best Regards William Tan

Claims Department | ComfortDelgro Engineering Pte Ltd

Off: 62148737 | Fax: 62141843

From: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>

Sent: Monday, 5 August 2019 12:45 PM

To: William Tan Thoo Seng <williamtan@cdge.com.sg>; Catherine Koh Mui Gek <catherinekoh@cdge.com.sg> Subject: Your Ref: T 0619/ SHC3718H/ WT(st) *Our Ref: CC4/ASM19010286/K1pa3 [ACCIDENT INVOLVING SFH

6111K(AXA) & SHC 3718H ON 09/06/2019]

Your Ref: T 0619/ SHC3718H/ WT(st)

Without Prejudice

Our Ref: CC4/ASM19010286/K1pa3

Dear Sirs/Mdm,

ACCIDENT INVOLVING SFH 6111K(AXA) & SHC 3718H ON 09/06/2019

We refer to the above matter.

We propose settlement at a global sum of \$1,530.00(all-in).

Please confirm acceptance.

"Please note that our proposal and correspondence with you is strictly on a without prejudice basis and should not be construed as an admission of liability on our part and/or that of our policyholder and/or the authorised driver. The terms of our without prejudice engagement should not be disclosed in any other related matter(s) in respect of this accident nor should it be binding in any other related claims."

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: <u>chewht@lkkauto.com</u> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933) This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

ComfortDelGro Engineering Pte Ltd [Registration No. 199506048W]

COMFORTDELGRO ENGINEERING

Our Ref :

T 0619/ SHC3718H /WT(st)

Your Ref :

Dear Sir

Date

26-Jun-19

CDGE Taxi Claims Dept

59 Lovang Drive 4th Fir Singapore 508969

AXA Insurance Pte Ltd 8 Shenton Way

#24-01, AXA Tower Singapore 068811

Attn: Motor Claims Department

WITHOUT PREJUDICE

4

pcs

ComfortDelGro Engineering Pte Ltd 205 Braddell Road Singapore 579701

Mainline +65 6383 8280 Facsimilie +65 6280 9755

www.cdge.com.sq

year Prignition for Employee

Workshops

Braddell 205 Braddell Road Singapore 579701

59 Loyang Drive Singapore 508969

Sin Ming 383 Sin Ming Drive Singapore 575717

Pandan 45 Pandan Roso Singapore 609286

320 Ubi Road Singapore 408649

Senoko 24 Senoko Loop Singapore 758158

Sungei Kadut 7 Sungel Kadut Wa Singapore 728791

Yishun Yishun Industrial Park J Singapore 758732

ACCIDENT INVOLVING OUR TAXI SHC3718H YOUR INSURED SFH6111K ON 09.06.19 AND OTHER

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner SHC3718H which was involved in the captioned accident with your of motor vehicle No: insured vehicle. The vehicle owner and the taxi driver conderned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving : SFH6111K we are submitting these claim for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,123.50
2	3 days Loss of Rental @ \$ 110.67 per day	\$ 332.01
3	Survey Report Fees (Surveyed by M/s LKK)	\$
4	GIA / LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ 500
6	Towing Fees	\$ 0.0
	Sub Total :	\$ 1,463.00

HIRER'S CLAIM

80.00 per days days Loss of Income @ 240.00 Total Claims: S

We enclose herewith the following documents to support the claims: -

Original repair bill and photocopies of photographs

SFH6111K

LTA search slip/s of : c) GIA / Police report/s of :

SHC3718H

Letter of authority from owner / hirer / operator

(X) Photocopie/s of Accident Scene Photo/s () Towing receipts

() Witness statement/s (x) Rental Rate letter (x) Downtime/Mileage record

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

William Tan

CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1843 Email: williamtan@cdge.com.sg

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







Hsiao Tong (LKKAuto)

From:

Hsiao Tong (LKKAuto)

Sent:

Wednesday, 10 July 2019 2:05 PM

To:

RAVIRAJOO@YMAIL.COM

Subject:

ACCIDENT INVOLVING SFH 6111K(AXA) AND SHC 3718H ALONG/AT SLIP RD FROM CMMWTH AVE WEST TOWARDS CLEMENTI AVE2 ON 09/06/2019

10 JULY 2019

MR RAVINDRAN S/O M RAJOO / MR DANIEL DHARSHAN RAVINDRAN

Dear Sir/ Mdm

OUR REF

: CC4/ASM19010286/K1pa3// S9M01Q6P

YOUR REF : SFH 6111K

ACCIDENT INVOLVING SFH 6111K(AXA) AND SHC 3718H ALONG/AT SLIP RD FROM CMMWTH AVE WEST TOWARDS CLEMENTI AVE2 ON 09/06/2019

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a third party claim(s) from COMFORTDELGRO ENGINEERING PTE LTD acting on behalf of the owner of SHC 3718H against your motor insurance policy.

Based on the accident report and accident scenario, liability is not in your favour as it is a head-to-rear collision. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. You intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 7 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sa or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact as at 6742 3197 or chewht@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933) LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING

40 SHC3718H , SFH6111K

ON 09-Jun-19 23:05

ALONG

C'WEALTH AVE WEST >> CLEMENTI AVE 2

1 / We

TAY BAK SONG

(Hirer) NRIC No.:

S1463687J

and/or

(Relief) NRIC No.:

Taxi Number

SHC3718H

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

- 1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
- 2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
- 3. To sign Discharge Voucher on my/our behalf.
- 4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

10-Jun-2019

Name of Hirer

TAY BAK SONG

Hirer NRIC

S1463687J

Signature :

Address

342 CLEMENTI AVENUE 5 #04-176

120342

Contact No.

97587830



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SFH 6111K	(Insd veh)	755	
	SHC 3718H	(TP veh)	Model: HYUNDAI 140	
Date of Accident/ Time:	09/06/2019			

Remarks:	* Assessed Liability to b	e filled	only for chain collisic	ns and for cases where BOLA does	not apply.	4
	BOLA Liability: 100	(%)		Assessed Liability (*):	_(%) /	
B)	For GIA Registered Wo	kshop	-	BOLA Applicable: Yes/ 100 BOLA	Scenario No: 27	
A)	For Non GIA Registered	Wark	shop:	Agreed Liability(%)		
and the second s	arty Workshop GIA Registered		[X] YES []	NO (Kindly indicate below)		
	me : COMFORTDELGRO ENGINEER	1	THE HADARATA			
Final Settl	lement Sum (Global Sum)	15	1.530.00			
Others:		15				
	Search Fee	5				
Rental (if a	any)	: \$			days at 5	per da
Loss of Us	tt l	: 5			days at \$	per da
Final Repa	ir Cost	. 5				
Repair Est	imate	- 5	1875.07			

NOTE:

- 1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 2. THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- 3. AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are not received within 7 days of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a full and final settlement that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

26-8-19

Signature of workshop representative / Workshop stamp

Date:

AWK

Signature of AXA's surveyos/representative
Name of AXA's surveyor /Representative:
Date: 7/9//9

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date: 26-8-19

SHEAPORE HOUSE

CORD ENGINEERING PTE LTD

Please forward your cheque made payable to COMFORTDELGRO ENGINEERING PTE LTC

AXA insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22 Telephone: +65 6880 4888 – axa.com.sg The contents of this document apply to ventrile damages only All personal injuries and damages arising therefrom are excluded from the embit and application of this document."

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd

205 Brastell Road Singapore 571711. Marriera - 65 6353 6260 Flatamin + 65 6260 9755

50 Lovery Dove Dispussion 500000 303 Ser Many Dove Singapore 575717 45 Paristin Frad Singapore 600000 24 Simile Loop Singapore 759198 7 Surger Kabul Way Singapore 729791 1217 Yelun Subatrui Park A Singapore 75979 200 PANY REG. NO.: 199506048W

Page: 1

AXA INSURANCE PTE LTD

SHENTON WAY AXA TOWER #24-01

SINGAPORE

CONTACT NO: 63387288

VEHCLE NO SHC3718H

NO/DATE 91450601 20.06.2019

MAKE HYUNDAI

MODEL

ODOMETER READING

DATE OF REG 07.08.2014

CHASSIS CODE

JOB TYPE KMHLB41UMEU056299

Description : 3P 09.06.2019

Invoice for Lump Sum Repair

Total Lump Sum Repair Amt Add GST @ 7 000 B

Total Invoice amount

Issued by : CHEWBERLENG 20.0 Repair Type : CLSO/57/57 Payment Type/Term : /Credit 30 days CHEWBEELENG 20.06, 2019 15:01:29

ComfortDelGro Engineering Pte Ltd A member of COMFORDUCAD

Head Office: 205 Braddell Road Singapore 579701

ACCOUNT No. INVOICE No. **AMOUNT** BANK/CHQ No.

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

Our Ref: CT19060219

Date: 20 June 2019



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON

09/06/2019 @ 23:05 hrs

ALONG

C'WEALTH AVE WEST >> CLEMENTI AVE 2

INVOLVING

SFH6111K

We refer to the above-mentioned accident and wish to inform that Comfort Transportation Pte Ltd is the registered owner of the taxi bearing vehicle registration number SHC3718H (the "Taxi"). The Taxi was hired to TAY BAK SONG IC NO S1463687J a registered hirer-operator of Comfort Transportation 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.

	SHC SHSH		MILEAGE	HOURS OPERATED (TIME	RATED (TIME	DATE	
DATE	NAME OF DRIVER	MILEAGE READING	(KOM)	FROM	OT.	DALE	NAME OF DRIVER
050619	744 RAK 8020	211148	187	1305 0255	2550		
010010	TAN WAY SONE	2		1725 0135	0135		
017010		2 2	13.0	1750	7500405		
1001	CAY C	2 2 2 2 - 2	172	1735	735 0250		
08080	RAV SONG		1961	1125	11250320		
20000	TAU DAY CONGS			1315			
10/01/19	- Olon A	200	18yang 1435	3 1435	1		
10 01	Rossin T	BY BAK SONG	2	1	1730		
112	1 1 1 1 1 1 1 1 1						

Enquire Vehicle Insurance Details

Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name

SFH6111K 09 Jun 2019 / 23:05:00 Successful A12 AXA INSURANCE PTE LTD

Previous OK

SUC 37184



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 Intern	nationale Des Experts En Autom	nobile
AXA INSURANCE	PTE LTD	Ref : CC4/ASM19010	0286/K1pa3q2
8 SHENTON WAY AXA TOWERSING ATTN:JAS TAN		Date: 17-09-2019 Code: ASM	
1.	Policy Particul	ars :- THIRD PARTY CLAI	IM
Insured Veh		Veh. Inspected	SHC 3718H
Policy No.	VA1/GA339102	Coverage (\$)	0.00
Claim No.	S9M01Q6P	Excess (\$)	0.00
Assign From	m	Assign Date	11/06/2019
2.	Vehicle P	articulars & Condition	
Make & Mod	del HYUNDAI 140	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2014
Chassis No	. KMHLB41UMEU056299	Colour	BLUE
Odometer	311964	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIN
General	FAIR		
3.	Cor	nditions of Tyres	
	Size	Make	Balance
R/H Front T	yre 205/60 R16	WEST LAKE	7 mm
L/H Front T	yre 205/60 R16	WEST LAKE	7 mm
R/H Rear Ty	yre 205/60 R16	WEST LAKE	7 mm /
L/H Rear Ty	yre 205/60 R16	WEST LAKE	7 mm
4.	Descr	ription of Damages	
THE VEHICLE	E SUSTAINED DAMAGES AT THE	REAR PORTION.	
	EE DETAILS.	· ·	
5.		neral Information	
Accident Da		Inspection Date	11/06/2019
Survey held	d at COMFORTDELGRO ENGIN	NEERING PTE LTD	
	59 LOYANG DRIVE SINGAPORE 508969	/	
5a.		Remarks	
A)THE INSPE	ECTION WAS CONDUCTED ON A DANCE TO YOUR INSTRUCTION	"WITHOUT PREJUDICE" BAS S. WE HAVE NOT AUTHORIS	SIS. SED REPAIRS.
5b.		nate Days of Repair	

2 Working Days

ESTIMATED NORMAL PERIOD FOR REPAIR:



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

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

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 3718H

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR BUMPER (CONSISTENT)	DEFORMED	553.00	553.00
10	REAR BUMPER CLIP (CONSISTENT)	NECESSARY	22.00	22.00
-1	REAR BUMPER UNDER COVER (CONSISTENT)	CUT	228.00	228.00
	LESS 20% DISCOUNT		-160.60	-160.60
			642.40	642.40
	SPECIAL NETT ITEMS			
1	REAR BUMPER RUBBER MAT (SN) (CONSISTENT)	NOT NECESSARY	50.00	
1	REAR BUMPER ADVERTISEMENT LOGO (SN) (CONSISTENT)	NECESSARY	50.00	50.00
2	REAR FENDER ADVERTISEMENT LOGO (LH/RH) @\$100.00 (SN) (CONSISTENT)	NECESSARY	200.00	200.00
	A CONTRACTOR OF THE CONTRACTOR		300.00	250.00
	LABOUR			
	PANEL BEATING.		400.00	200.00
	SPRAY PAINTING CHARGE.		300.00	200.00
	WIRING CHARGE.	NOT NECESSARY	30.00	
	REMOVE/REFIX REVERSE SENSOR .	NOT NECESSARY	80.00	
			810.00	400.00
	GRAND TOTAL		1,752.40	1,292.40
	RECOMMENDED COST OF LUMP SUM REPAIRS			1,050.00

Report Ref No. CC4/ASM19010286/K1pa3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

(TO ITS PRE-ACCIDENT CONDITION)

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:-This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoeyer, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.

SERVICE REQUESTS

*

CLAIMS

Vehicle Information Incident Vehicle Registration # Moke Wall for: Approve invoice Atthense Next Step Actions

CC4/ASM19010286/K1pa3st2

Reference

SPMOTOGP

11 Jun 2019 857:29 AM

Pripart Date

9 Anne 2019

Loss Date

11 June 2019

Request Date

Due Date

TEVD HYUNDAI

Service Address

SHC1718H

S/O M RAJOO RAVINDRAN BIC 336 CLEMENTI AVENUE 2, #04-32, 120336, Primary Contact/Insured Singapore

LKK AUTO CONSULTANTS PTE

Vendor Name

CTD(TP)

Pending verification - Direct

Services

Third Party Vehicle Damage

Type of Loss

RAVIRAJOOBYMAILCOM

6568804844 jastan@axa.com.sg TAN Jas

Claim Handler

NON-REPORTED Additional Instructions Messges Involces History Documents Assessment Metrics Notes

AUTHOR SUB-TITE J. Document Sulfype 4 Uplind Documents Document Type MAME

DATE

Merimen

Reports & Statement

Accident Statement

LXKRweices (7) pdf	Harolco	Surveyor/ Assessiv Bajenne	LICK AUTO CONSULTANTS PTE	20 September DATE (PCACHE)
RENTAL RECEIPT par	Form / Claim Documents	Others	LHK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
HENTAL MILEACE put	Farms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
LIA SEARCH pdf	Forms / Claim Documents	Others	LICK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
LKOdmpection (2) pat	Farms / Claim Documents	Others	LICK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
Lift/Adjustment ta Chpdf	Forms / Claim Documents	Others	LKK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
MAYMENT BREAKDOWN, EXPRESS SETTLEMENT FORM per	Forms / Claim Decaments	Satisfaction / Discharge Voucher	LICE AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
AUTHORISATION TO ACT FORMard:	Forms / Claim Documents	POA / Authority Letter	LICK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
WORKSHOP INVOICE put	Baycisca	Ropairer	UKK AUTO CONSULTANTS PTE LTD (TP)	20 September 2019
LETTER TO OLD III	Letters and Commondence	Policy Holders / Insured	UKK AUTO CONSULTANTS PTT. LTD (TP)	20 September 2019
NOT POLICE REPORT pot	Roports & Statement	Police Report	LICK AUTO CONSULTANTS PTE	22 July 2019
TP - IA putt	Forms / Claim Documents	Assessment	LICK AUTO CONGULTANTS PTE LTD (TP)	17 June 2019
LIKK SURVEY PHOTOped	Forms / Claim Documents	Others	LIKK AUTO CONSULTANTS PTE. LTD (TP)	17 June 2019
LKK RESURVEY PHOTO-deff	Forms / Claim Documents	Others	LICK AUTO CONSULTANTS PTE	17 June 2019

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	LINK AUTO CONSULTANTS PTE LTD (TP)	NRCAM Santosh Pendurang	LICK AUTO CONSULTANTS PTE. LTD (TP)
Sus-met	Estimate / Quotation	Othern	Policy Holders / Insured
MT	Reports & Statement	Letters and Correspondence	Letters and Correspondence
Non	TP ESTIMATE -MARKED pair	■TP CDGE-EMAIL FROM WORKSHOP FOR TP PEG.mig	Lir to insured -non-reporting aid!

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